SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Support Support Suppo	A Signature Agent Addressee Addressee B. Received by (Printed Name) C. Date of Delivery M. 1 D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Eldon McAfee	
Beving, Swanson & Forrest, P.C. 321 E. Walnut St., Suite 200 Des Moines, Iowa 50309	3. Seprice Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
321 E. Walnut St., Suite 200	Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)

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