

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

QWA-07-2010-003

Michelle S. Wiler, President  
Crossroads General Store  
110 Johnson Street  
Middletown, Missouri 63359

2. Article Number

(Transfer from serv.)

7006 2760 0000 8648 3164

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Rhonda Saxton*  Agent  
 Addressee

B. Received by (Printed Name)

RHONDA SAXTON

C. Date of Delivery

2-3-10

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

100585-02-M-1540

Domestic Return Receipt