| 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. 1. Article Addressed to: | B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below: |
| T6CA -07- 2010 - 0029 Thomas L. Rhodes AA Windows N Doors Inc. 1304 South Saddle Creek Road | 3. Service Type Succertified Mail |
| Omaha, Nebraska 68104 | □ Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes |
| 2. Article N 7006 2760 0000 864 | L 3211 |
| PS Form 3811, February 2004 Domestic Ret | |

.