

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:

FIFRA-07-2011-0006

Charles Swayze
General Manager
Farmers Cooperative Equity
PO Box 40
Isabel, Kansas 67065

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Charles Swayze Addressee

B. Received by (Printed Name) C. Date of Delivery
Charles Swayze 9-29-11 DR

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

2. Article Number 7004 2510 0006 9725 6187
(Transfer from service)

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540