

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:

#SDWA-08-2016-0009

Corporation Service Company
1821 Logan Avenue
Cheyenne, WY 82001

B

MAY 13 2016

2. Article Number

(Transfer from service label)

7009 2250 0003 4169 1490

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Leander

Agent

Addressee

B. Received by (Printed Name)

leander

C. Date of Delivery

5/17/16

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