SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)  B. Date of Delivery  C. Signature  X. Received by (Please Print Clearly)  Agent  Addressee
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
steven P. Case McGrath North Mullin & Kratz, PC LLO First National Tower	
Suite 370 1601 Dafge St. Omaha, ME 68102	3. Service Type  ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ C.O.D.
EPCRA-05-2008-0004	4. Restricted Delivery? (Extra Fee)
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