

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:

CAA-07-2010-0019

James L. Chism, General Manager
Frenchman Valley Cooperative
East Highway 30
Sidney, Nebraska 69033

2. Article Number
(Transfer from servic

7006 2760 0000 8647 7316

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Bill Struckmeyer

Agent

Addressee

B. Received by (Printed Name)

Bill Struckmeyer

C. Date of Delivery

5-12

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