

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:

CUA-07-2011-0035

Michael M. Beachner, President
 Mac's Cit-N-Split
 812 Washington Street
 St Paul, Kansas 66771

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Caroline Hastings* Agent Addressee

B. Received by (Printed Name) *Caroline Hastings* Date of Delivery *8/19/11*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

PO BOX 321

3. Service Type
- Certified Mail
 - Registered
 - Insured Mail
 - Express Mail
 - Return Receipt for Merchandise
 - C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article No. 7006 2760 0000 8651 7296
 (Transfer)

PS Form 3811, February 2004 Domestic Return Receipt