

**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:

**Andrew Schlegel**  
**Anderson & Yamada, P.C.**  
**9755 Sourwest Barnes Road, Suite 674**  
**Portland, OR 97225**

2. Article Number  
(Transfer from service label)

7011 2970 0000 0880 7280

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Kevin Anderson*

- Agent  
 Addressee

B. Received by (Printed Name)

*Kevin Anderson*

C. Date of Delivery

*2/20/04*

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