SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. signature Agent A. Signature Agent B. Received by (<i>Printed Name</i>) C. Date of Deliver D. Is delivery address different from item 1? Yes
1. Article Addressed to: CAA-07-2010-0007 R. Patt Lilly	If YES, enter delivery address below: No
Chief Administrative Officer Triumph Foods 5302 Stockyards Expressway	Certified Mail Express Mail Registered Return Receipt for Merchandis
St. Joseph, Missouri 64504	4. Restricted Delivery? (Extra Fee)
(Transfe7006 2760 0000 8	<u>646 3319</u>
PS Form 3811, February 2004 Domestic	c Return Receipt 102595-02-M-15

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