

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

7005 1160 0004 4818 9284

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		
Sent To Mr. Trent Sprecker Registered Agent for United Western Coop, Inc. 222 E. Lincoln Highway Missouri Valley, IA 51555		
Street, Apt. No., or PO Box No. City, State, ZIP+4		
PS Form 3800, June 2002		See Reverse for Instructions

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:

Mr. Trent Sprecker
 Registered Agent for United
 Western Coop, Inc.
 222 E. Lincoln Highway
 Missouri Valley, IA 51555

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Karen M. [Signature] Agent Addressee

B. Received by (Printed Name)
 Karen M. [Signature]

C. Date of Delivery
 8-30-06

D. Is delivery address different from Item 1? Yes
 If YES, enter delivery address below: No
 P.O. Box 270
 Missouri: Vly JIA
 51555-0270

3. Service Type
 Certified Mail Express Mail
 Registered Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

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