

7002 0860 0006 5966 0632

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

OFFICIAL USE

Postage	\$	POSTMARK Here OCT 19 2004
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Post*		

Sent To John Monnig, President
 Universal Galvanizing, Inc.

Street, Apt or PO Box 107 Didion Drive

City, State St. Peters, MO 63376

PS Form 3800, April 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:

John Monnig, President
 Universal Galvanizing, Inc.
 107 Didion Drive
 St. Peters, MO 63376

2. Article Number
(Transfer from service label)

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PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1035

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *M. Ruchmann* Agent Addressee

B. Received by (*Printed Name*) _____ C. Date of Delivery *10-25*

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

ST. PETERS, MO
 OCT 25 2004

3. Service **USPS**

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (*Extra Fee*) Yes