

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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 X <i>Benny Vasquez</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>CWA-07-2010-0099</i> Melissa M. McGuire Vice President, General Counsel and Secret Bridgestone Americas Tire Operations, LLC 4600 NW 2 nd Avenue Des Moines, Iowa 50313	B. Received by (Printed Name) <i>Benny Vasquez</i>	C. Date of Delivery <i>6/14/10</i>
2. Article Number (Transfer from service)	D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, February 2004	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
Domestic Return Receipt	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes 7006 2760 0000 8648 6745	
102595-02-M-1540	PS Form 3811, February 2004	