

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:

FIFRA-07-200A-0019

Mark Finck
General Manager
Farmers Elevator Cooperative of Rock Valley, Iowa
P.O. Box 37
Rock Valley, Iowa 51247

2. Article
(Tra

7004 2510 0006 9718 3599

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Wayne Kellis*

- Agent
 Addressee

B. Received by (Printed Name)

Wayne Kellis

C. Date of Delivery

7-5-0

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