 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. 	COMPLETE THIS SECTION ON DELIVERY A. Signature X March B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to: CWA-07-2008-0070	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
David F. Hoover, President Penny's Concrete, Inc. Plant #2 23400 West 82 nd Street	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
Shawnee Mission, Kansas 66227	4. Restricted Delivery? (Extra Fee)
(Transfer from serv7006 2760 0000 PS Form 3811, February 2004 Domestic Ref	8651 7036 tum Receipt 102595-02-M-1540

•