COMPLETE THIS SECTION ON DELIVERY 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 be turn the card to you.
 Attach this card to the back of the mailpiece, or confidential shape remotes LERK A. Received by (Please Print Clearly) ☐ Agent ☐ Addressee ☐ Yes YBS, enter delivery address below: □ No Mr. Chris Goeloe Environmental Manager Anderson Development Company 3. Service Type Certified Maii
Registered ☐ Express Mail 1415 E. Michigan Street Return Receipt for Merchandise Adrian Michigan 49221 ☐ Insured Mall 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7001 0320 0006 1448 7357 (Transfer from service label) PS Form 3811, March 2001 102595-01-M-1424 Domestic Return Receipt