

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: 4/4/±3 B.M.
AC 2010-003
Les Curtis
115 Rio Vista
Thebes, IL 62990

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *Les Curtis* Addressee

B. Received by (Printed Name) C. Date of Delivery

Les Curtis 4-9-13
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

2. Article Number
(Transfer from service label) 7011 0110 0001 8270 3608

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540