

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: 12/4/08 B.M.
 AC 2008-034
 Joseph Combs
 260 Isreal Street
 White Hall, IL 62092

2. Article Number

(Transfer from service label)

7008 1830 0003 9908 7768

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Joseph Combs Agent
 Addressee

B. Received by (Printed Name)

HARRY COMBS

C. Date of Delivery

12/10/08

D. Is delivery address different from item 1? Yes
 No
 If YES, enter delivery address below:

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes