COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature ☐ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, RICKY STRATTON or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? Article Addressed to: 10/18/12 B.M. If YES, enter delivery address below: ☐ No AC 2013-005 & AC 2013-006 Ricky Stratton 2268 West Street Literberry, IL 62660 3. Service Type Certified Mail ☐ Express Mail Registered □ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. Restricted Delivery? (Extra Fee) ☐ Yes www.wmber 0001 8270 iransfer from service label) PS Form 3811, February 2004 Domestic Return Receipt

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