

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: 2/7/13 B.M.
AC 2013-026
Frank E. Seibert
503 S. Maple Street
West Frankfort, IL 62896

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
[Signature] ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
2-11-13

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

Article Number
(Transfer from service label) 7011 0110 0001 8270 3158

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540