

**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: 2/2/17 B.M.

PCB 2017-040  
Rollyn C. Kuntz  
Tri-Spec Sow Center  
30341 N. 2080 E. Road  
Gridley, IL 61726

2. Article Number  
(Transfer from service label)

7014 0510 0001 5481 0849

PS Form 3811, July 2013

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Addressee  Agent  
*X Lucas Kuntz*

B. Received by (Printed Name)  Yes  No  
*Lucas Kuntz* C. Date of Delivery *2/6/17*

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

3. Service Type  
 Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes

Domestic Return Receipt