

**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: 12/1/11 B.M.  
AC 2012-006  
David W. & Linda Edwards  
200 Paradise Road, Lot #78  
Carterville, IL 62918

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X 

 Agent Addressee

B. Received by (Printed Name)

D Edwards

C. Date of Delivery

12/8/11

D. Is delivery address different from item 1?  YesIf 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 8269 9833