

## 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: 1/5/12 B.M.  
 PCB 2012-001  
 Ted Goodner  
 Hoopeston Foods  
 P.O. Box 405  
 Hoopeston, IL 60942

2. Article Number  
 (Transfer from service label)

7011 0110 0001 8270 0232

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X



Agent  
 Addressee

B. Received by (Printed Name)

Brandon Tyler

C. Date of Delivery

1-10-12

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