COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete □ 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. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, arb Jacobor on the front if space permits. ☐ Yes D. Is delivery address different from item 1? Article Addressed to: 3/1/12 B.M. If YES, enter delivery address below: ☐ No PCB 2012-099 Richard J. Alton S105 G- HAI Alton Irrigation, Inc. 8096 Luther Road RockFalls, IL 61071 3. Service Type Certified Mail ☐ Express Mail ☐ Registered □ Return Receipt for Merchandise ☐ Insured Mail CO.D. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 0110 0001 8270 0324 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540