

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: 4/5/12 B.M.
 AC 2012-035
 Brian S. Mullins
 P.O. Box 192
 Keensburg, IL 62852

COMPLETE THIS SECTION ON DELIVERY

A. Signature


 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-20-12

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

330 W. 10th #703

MT. CARMEL IL 62863

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 8270 0522