7	
SENDED: COMPLETE THE COMPLETE	4
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X
1. Article Addressed to: 2/21/13 B.M. PCB 2013-034 Todd Donley, V.P. Info Corner Materials, Inc. P.O. Box 13	D. Is delivery address different from item 1?
8998 West Outer Road Williamsville, IL 62693-0013	3. Service Type DECertified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number: (Transfer from Service Jabel) 7011 0110 0001 8270 3226	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	