

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: 2/4/16 B.M.,
AC 2016-008
Greg Lingle d/b/a GTS, Inc.,
140 Wolf Creek Road
Goreville, IL 62959

2. Article
(Transit)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Beverly Baker Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
Beverly Baker *2/10/16*

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt