SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. 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 Agent Address B. Received by (Printed Name) C. Date of Deliver
PCB 21-81 Chris Fredrickson Fredrickson Hogs Inc Little York 353 210 th Ave Monmouth, IL 61462	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
9590 9402 5991 0062 5197 37 2 Article Number (Transfer from service label)	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery Restricted Delivery ☐ Collect on Delivery Restricted Delivery ☐ Collect on Delivery Restricted Delivery ☐ Adult Mail Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Adult Restricted Delivery ☐ Registered Mail Restricted Merchandise ☐ Signature Confirmation Restricted Delivery ☐ Resistered Mail Restricted Merchandise ☐ Resistered Mail Restricted Delivery ☐ Registered Mail Restricted Melivery ☐ Registered Mail Restricted Delivery ☐ Registered Mail Restricted Melivery ☐ Registered Mail Restricted Melivery ☐ Registered Mail Restricted Melivery ☐ Registered Mail Restricted Delivery ☐ Restricted Delivery ☐ Restricted Delivery ☐ Restricted Melivery ☐ Restrict