

**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: 6/20/13 B.M.  
AC 2013-043  
Mike Munson  
705 North Harrison  
Oblong, IL 62449

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒*Mike Munson*☐ Agent☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-24

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

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 4315

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540