

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:

SHOSHONE TREE FARMS INC
HWY 200 BOX 220
LACLEDE, ID 83841

2. Article Number

(Transfer from service label)

7012 1640 0001 3856 1070

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

W. Bend

☐ Agent

☐ Addressee

B. Received by (Printed Name)

W. Bend

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes
☒ No

MAY 29 2013

DEPARTMENT OF

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

102595-02-M-1540