

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:

DIANE R BURKE
2911 S 45 EAST
IDAHO FALLS ID 83401

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Diane R Burke*☐ Agent☐ Addressee

B. Received by (Printed Name)

Diane R Burke

C. Date of Delivery

*12-6-07*D. Is delivery address different from item 1? ☐ Yes

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1. Article Addressed to:

DOYLE ROBERTSON
4561 E SUNNYSIDE RD
AMMON ID 83406

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Debra Robertson*☐ Agent☐ Addressee

B. Received by (Printed Name)

Debra Robertson

C. Date of Delivery

*12/6/07*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

RICHARD FOWLER
5121 E 21ST SOUTH
AMMON ID 83406

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Jeanette Fowler*☐ Agent☐ Addressee

B. Received by (Printed Name)

JEANNETTE Fowler

C. Date of Delivery

*12/6/07*D. Is delivery address different from item 1? ☐ YesIf 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)

7005 1160 0000 1504 7504

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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