

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: ADM/72-16601

TAIT JOHNSON
PO BOX 680792
PARK CITY UT 84068

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature X ☐ Agent
☐ Addressee
- 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 (Copy from service label)

7002 0510 0001 0739 1475

PS Form 3811, July 1999

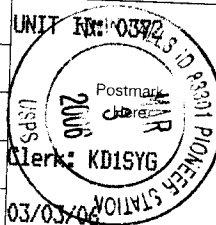
Domestic Return Receipt

102595-99-M-1789

**U.S. Postal Service
CERTIFIED MAIL RECEIPT***(Domestic Mail Only; No Insurance Coverage Provided)*PARK CITY, UT 84068

Postage	\$ 0.63
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.88

TAIT JOHNSON
PO BOX 680792
PARK CITY UT 84068



for Instructions

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1. Article Addressed to: 72-16601/ADM

TAIT JOHNSON
1317 NORTH 141ST AVE
OMAHA NE 68154

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X☐ Agent
☐ AddresseeD. Is delivery address different from item 1?
If YES, enter delivery address below: ☐ Yes
☐ 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 (Copy from service label)

7002 0510 0001 0739 1482

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

U.S. Postal Service**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

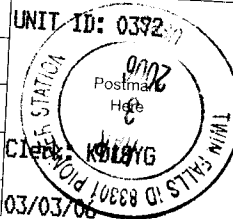
OMAHA, NE 68154

Postage	\$ 0.63
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.88

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or
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TAIT JOHNSON
1317 NORTH 141ST AVE
OMAHA NE 68154

PS



or Instructions