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Missouri Public
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12C-2007-0394 / SC-2007-0396 04/19/07

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ 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.		A. Signature ☒ <i>Sandy Garrison</i> ☐ Agent ☐ Addressee	
1. Article Addressed to: Jeremiah Nixon 1519 McNutt Rd Herculaneum, MO 63048		B. Received by (Printed Name) <i>Sandy Garrison</i>	C. Date of Delivery <i>4-25-07</i>
		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)		7004 1350 0003 1351 6698	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	