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<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

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Total Postage and Fees

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City, State, ZIP+4®



WARD & SON\* ALFRED  
ATTN: RANDY WARD  
P O BOX 737  
OGALLALLA, NE 69153

PS Form 3800, April 2015 PSN

WL 2193171

Mailed: 2/2/2016