

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:

JOHN W. MORRISON  
 CROWLEY FLECK PLLP  
 PO BOX 2798  
 BISMARCK ND 58502-2798

2. Article Number  
(Transfer from service label)

7012 3460 0000 6344 1560

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent  
 X *[Signature]*  Addressee

B. Received by (Printed Name) *S. HARRIS* C. Date of Delivery *8/8*

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

*AUG 8 2014*  
 USPS

3. Service Type

Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes