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■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature A. Signature B. Received by (Printed Name) D. Is delivery address different from item 1? PYES, enter delivery address below:
Hi-Ridge Transport, Inc., Kendrick McCullough, Registered Agent Rt. 1 Box 519 Highland Home, Alabama 36041	2. OGCUBAT - MHT 3. Service Type Certified Mail Registered Insured Mail C.O.D.
(Transfer from service label)	4. Restricted Delivery? (Extra Fee) Yes 304 2530 0006 0034 2396 Return Receipt 102595-02-M-1540

Domestic Return Receipt

PS Form 3811, August 2001