SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON	DELIVERY
Complete items 1, 2, and 3.	A. Signature	
 Print your name and address on the reverse 	x amm	E Agent
so that we can return the card to you.	B. Received by (Printed Name)	C. Date of Deliv
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GP Irrigated Farms, LLC		
732 SE County Road 36		
Syracuse, KS 67878	and a second second	
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PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Rec
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PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. 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 X Aueda Agent B. Received by (Printed Name) C. Date of Delivery Deliv
1. Article Addressed to:	D. Is delivery address different from item 1? Yes
Floriberto Rueda Sanchez & Rosa Maria Rueda 9900 County Road HH.5 Lamar. CO 81052	If YES, enter delivery address below: No
	3. Service Type □ Priority Mail Express® □ Adult Signature □ Registered Mail™ □ Adult Signature Restricted Delivery □ Registered Mail Restricter
9590 9402 3805 8032 5349 57	Collect on Delivery