

SENDER: COMPLETE THIS		U) (1 — 240 G— Q RQR COMPLETE THIS SECTION ON DELI	IVERY
 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: Hurricane Deck Holding Company P.O. Box 431 Sunrise Beach, MO 65079 		A. Signature **Clude** C. Date of Delivery **Delivery** Delivery Deli	
		3. Service Type Certified Mail Express Mai Registered Return Rece Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)	il pipt for Merchandise
Article Number (Transfer from service label)	7005 03	190 DDD3 2881 2617	
PS Form 3811, February 2004 Domestic Return Receipt			102595-02-M-1540