



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Set 1 to	
Mr. Walt Thayer	
IMC Fertilizer, Inc.	
P.O. Box 71	
Carlsbad, New Mexico 88220	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date Medano VA St. #12, 13, 14 15, 16, 17 objections form and apd	

PS Form 3800, June 1991

Fold at line over top of envelope to the right of the return address.

CERTIFIED

P 106 965 901

P 106 965 901

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

3. Article Addressed to:

Mr. Walt Thayer
IMC Fertilizer, Inc.
P.O. Box 71
Carlsbad, New Mexico 88220

4a. Article Number

P 106 965 901

4b. Service Type

☐ Registered ☐ Insured

☒ Certified ☐ COD

☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)
Medano VA St. #12, 13, 14, 15,

16, 17 objections form/apd

DOMESTIC RETURN RECEIPT

PS Form 3811, November 1990 *U.S. GPO: 1991-287-086

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.