SENDER:	SENDER: COMPLETE THIS SECTION			COMPLETE THIS SECTION ON DELIVERY			
item 4 if Print you so that v Attach ti	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>				A. Signature  X. J. L. L. L. Agent  B. Received by (Printed Name)  C. Date of Delivery  An ice Nassey 12 32 10  D. Is delivery address different from from 17. Yes		
	Article Addressed to:				D. Is delivery address different from īfem 1? ☐ Yes If YES, enter delivery address below: ☐ No		
SOU Ms. Ja Green	DA-012 J nice Massey wood County F	511-0 RWD #2					
919 E P.O. I	919 E 7th P.O. Box 374 Eureka, Kansas 67045			3. Service Type  Cartified Mail			
Euron	a, Ransas o			4. Restricted Delivery	/? (Extra Fee)	☐ Yes	
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