SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 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. 	A. Signature X B. Received by (Printed Name) Carne Hughes	☐ Agent ☐ Addresse C. Date of Deliver 7-3/
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
Stack Metallurgical Service PO Box 17176 Portland, OR 97217-0176	3. Service Type Certified Mail Express M	iail ceipt for Merchandis
	Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number	220 0002 2000 200	
(Transfer from service label)	710 0002 3980 100	3