## **SENDER: COMPLETE THIS SECTION** 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. 1. Article Addressed to:

A. Signature ☐ Agent Address B. Received by (Printed Name) C. Date of Delive

COMPLETE THIS SECTION ON DELIVERY

D. Is delivery address different from item 1? If YES, enter delivery address below:

> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery

3. Service Type

- ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail ☐ Insured Mail Restricted Delivery

(over \$500)

2. Article Number (Transfer from service label)

9590 9402 7468 2055 0539 91

Domestic Return Receipt

Priority Mail Express®
☐ Registered Mail™

☐ Registered Mail Restrict

☐ Signature Confirmation¹

☐ Signature Confirmation

Restricted Delivery

Delivery