<ul> <li>SENDER: COMPLETE THIS SECTION</li> <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> <li>1. Article Addressed to:</li> </ul>			A. Signature       A. Signature         X       Agent         B. Received by (Printed Name)       C. Date of Delivery         Locit       Aucen         D. Is delivery address different from item 1?       Yes         If YES, enter delivery address below:       No		
			4. Restricted Delive	ry? (Extra Fee)	Yes
2. Article Numbe (Transfer from	7004 251	0 0006	9726 3778	!	
PS Form 3811, February 2004 Domestic Retu			urn Receipt		102595-02-M-1540
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