SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<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 mailpiece, or on the front if space permits.</li> </ul>		A. Signature  X Agent  Addresses  B. Received by (Printed Name)  C. Date of Delivery	
1. Article Addressed to:		D. Is delivery address different from item 1? Yes If YES, enter delivery address below:	
Kevin Dorsing President Royal Ridge Fruit and Co 13216 Road F SW Royal City, WA 99357	old Storage	o. So, vice Type  Certified Mail   Express Mail	
		☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
		4. Restricted Delivery? (Extra Fee) Yes	
Article Number     (Transfer from service label)	7011 2	970 0000 0880 7488	
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-154		