ENDER: 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 Agent Addressee B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to: #5DWA-08-2015-0050 Greg Kovacs, Registered Agent C5 Youth Foundation	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
of Southern California, Inc. 1334 S Central Avenue Los Angeles, CA 90021-2210	3. Service Type □ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7009 (Transfer from service label)	3410 0000 2600 9005
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540