SENDER:  • Complete items 1 and/or 2 for additional services.	I also wish to receive the
Complete items 3, and 4a & b. Print your name and address on the reverse of this form so that we can return this card to you.  Attach this form to the front of the mailining.	following services (for an extra fee):
does not permit.  Write "Return Receipt Requested" on the mailbleach or on the back if space  Write "Return Receipt Requested" on the mailbleach below to	1. L Addressee's Address
delivered.	2. Restricted Delivery Consult postmaster for fee.
Sarah R. Cofta, Eg D F 130 Regis	1455 6091
MAY CONTINUE MAY CONTINUE TO THE PROPERTY OF T	SS Mail  Return Receipt for Merchandise
5/ Signature (Addressee) POTECTION Addition	TAL 2 5 2000
6. Signature (Agent)	e is paid)
PS Form <b>3811</b> , December 1991	05-2009-0004