

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *Diana K* Addressee

B. Received by (Printed Name) C. Date of Delivery

1. **Cody Clapper
the Glass Nook, Inc.
409 Wellsian Way
Richland, WA 99352**



9590 9403 0670 5183 5123 95

Is different from item 1? Yes
Delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Delivery Restricted Delivery
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

2. Article Number (Transfer from sender label)
7016 2070 0000 6795 6985

(over \$500)