A. Signature	
B. Received by (Printed Name) C. Date of D 6-11-	dressee Delivery
D. Is delivery address different from item 1? Yes If YES, enter delivery address below:	
Service Type Service Type Off A Certified Mail® □ Priority Mail Express™ □ Return Receipt for Mercl □ Insured Mail □ Collect on Delivery	handise
4. Restricted Delivery? (Extra Fee) Yes	
	s
	B. Received by (Printed Name) C. Date of 6 — / / - / /