SENDER: COMPLETE THIS SECTION				COMPLETE THIS SECTION ON DELIVERY		
Print your nar	ricted Delivery ne and address	is desired s on the re	everse	A. Signature	il	☐ Agent ☐ Addressee
Attach this ca	hat we can return the card to you. ch this card to the back of the mailpiece, n the front if space permits.		B. Received by (Printed Name)	C. Date of Delivery	
Article Addressed to:				D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No		
CWA-C	77-20	10-0	2116		,	
David Mc	Kune, War	den				
	partment of		ections	3. Service Type	-ii	I=:I
301 Kansas Awenue			Certified Mail			
Lansing, F	Cánsas 660	43		4. Restricted De	il C.O.D. ivery? (Extra Fee)	☐ Yes
2. Article Numb	7006	2760	0000	8646 9779		
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