SENDER: 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 X Quarter Agent B. Received by (Printed Name) C. Date of Delivery
1 Article Addressed to	D. Is delivery address different from item 1? Yes
Beveridge & Diamond, F 1350 "I" Street, NW, Ste Washington, DC 20005	
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7012 101	0,0003,2872,5386,
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540