SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON I	DELIVERY
 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. 	A. Signature X. March Hogla B. Received by (Printed Name)	C. Date of Delivery
^{1. Arti} Lavila Curtis	ferent from address t	
Registered Agent 620 Signal Peak road White Swan, WA 989		
620 Signal Peak road	52 3. Service Type Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Collect on Delivery	 Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Return Receipt for Merchandise
620 Signal Peak road White Swan, WA 989	52 3. Service Type Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery	Registered Mail [™] Registered Mail Restricte Delivery Return Receipt for