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 Agent Addressee B. Received by (Printed Name) C. Date of Delivery G. Date of Delivery G. Date of Delivery D. Is delivery address different from item 1? No
1. Article Addressed to: Floyd Craig Gabel Gabel Farms	If YES, enter delivery address below: No
65 Gabel Lane Kinsey, MT 59338	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	LI Ilisured ividii
CWA 08-2011-0021/2 B	4. Restricted Delivery? (Extra Fee)