U.S. Postal Service CERTIFIED MAILT RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 1411 2595 Postage Certified Fee 0000 Return Receipt Fee (Endorsement Required) -2012-00D Restricted Delivery Fee (Endorsement Required) FIFICA OS 3470 Nicholas R. Ortega Total Postage & Fee Nick's Garden Center 2001 S. Chambers Road 7009 Street, Apt. No.; or PO Box No. Aurora, CO 80014 City, State, ZIP+4

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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,	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below: No
	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
PTFPAOS-2012-0001	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article 7009 3410 0000 2595	5 1411 stro Sale model