

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<p> <input type="checkbox"/> Complete items 1, 2, and 3. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. </p>	<p> A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee  </p>	
<p>1. Article Addressed to:</p> <p>Hestia Holdings LLC 1345 N Jefferson # 332 Milwaukee WI 53202</p>  <p>9590 9402 7749 2152 0947 07</p>	<p>B. Received by (Printed Name) Adam</p>	<p>C. Date of Delivery 6/14</p>
<p>2. Article Number (Transfer from service label)</p>	<p> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No </p> <p> 3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail Restrict Delivery <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Signature Confirmation <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) </p>	