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| 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. Article Addressed to: | A. Signature X | |
| 9590 9402 7811 2152 2366 46 2. Article Number (<i>Transfer from service label</i>) | | □ Priority Mail Express® □ Registered Mail™ □ Registered Mail Restricted Delivery □ Signature Confirmation™ □ Signature Confirmation Restricted Delivery |
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| Complete items 12, 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 MANUAL AGENT Addressee B. Received by (Printed Name) C. Date of Delivery | |
| 1. Article Addressed to: Allysin Wemic Quorum Architacts. 3/12 W Highland | D. Is delivery address different from item 1? If YES, enter delivery address below: No | |
| 9590 9402 7811 2152 2366 46 2. Article Number (<i>Transfer from service label</i>) | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Collect on Delivery Restricted Delivery □ Collect on Delivery Restricted Delivery | |
| 7021 2720 0000 2293 | 41.57 tricted Delivery | |
| PS Form 3811, July 2020 PSN 7530-02-000-9053 | Domestic Return Receipt | |