230570 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. ☐ Agent ■ Print your name and address on the reverse Addressee so that we can return the card to you. Date of Delivery B. Received by (Printed Name) Attach this card to the back of the mailpiece. or on the front if space permits. 1. Article Addressed to: D. Is delivery address different from item 1? If YES, enter delivery address below: ☐ Priority Mall Express®
☐ Registered Mail™ 3. Service Type ☐ Adult Signature
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail® □ Registered Mail Restricted Delivery
 □ Signature Confirmation™
 □ Signature Confirmation Restricted Delivery ☐ Certified Mail Restricted Delivery 9590 9402 7811 2152 2355 64 ☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery .... Manafar from conina laholl. 7021 2720 0000 2293 3822<sup>\*</sup> ail Restricted Delivery PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt