220578 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. **SD**Agent Print your name and address on the reverse حاف Addressee so that we can return the card to you. C. Date of Delivery В, Received by (Printed Name) Attach this card to the back of the mailplece, 8/12/22 L or on the front if space permits. hubber D. Is delivery address different from item 1? U Yes 1. Article Addressed to: If YES, enter delivery address below: No. Schrt  $\leq$ TW 10 3202 U □ Priority Mail Express®
□ Registered Mail™
□ Registered Mail Restricted Delivery
□ Signature Confirmation™
□ Signature Confirmation
□ Restricted Delivery 3. Service Type Adult Signature
Adult Signature Restricted Delivery
Certified Mail® Certified Mall Restricted Delivery 9590 9402 7440 2055 6192 38 Collect on Delivery
Collect on Delivery Restricted Delivery Article Number (Transfer from service label) 2 and have 7021 2720 0000 2293 4812 I Restricted Delivery PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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