


231625

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;">Savannah Holdings 3111 W Wisconsin Milw WI 53208</p>  <p style="text-align: center;">9590 9402 7811 2152 2363 49</p>	<p>D. Is delivery address different from item? <input type="checkbox"/> Yes If YES, enter delivery address below <input checked="" type="checkbox"/> No</p> <p>3. Service Type</p> <ul style="list-style-type: none"> <li style="width: 50%;"><input type="checkbox"/> Adult Signature <li style="width: 50%;"><input type="checkbox"/> Priority Mail Express® <li style="width: 50%;"><input type="checkbox"/> Adult Signature Restricted Delivery <li style="width: 50%;"><input type="checkbox"/> Registered Mail™ <li style="width: 50%;"><input checked="" type="checkbox"/> Certified Mail® <li style="width: 50%;"><input type="checkbox"/> Registered Mail Restricted Delivery <li style="width: 50%;"><input type="checkbox"/> Certified Mail Restricted Delivery <li style="width: 50%;"><input type="checkbox"/> Signature Confirmation™ <li style="width: 50%;"><input type="checkbox"/> Collect on Delivery <li style="width: 50%;"><input type="checkbox"/> Signature Confirmation Restricted Delivery <li style="width: 50%;"><input type="checkbox"/> Collect on Delivery Restricted Delivery <li style="width: 50%;"><input type="checkbox"/> Insured Mail
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; text-align: center;">7021 2720 0000 2293 4263</p>	<p style="text-align: right;">Restricted Delivery</p>