SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON D	ELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature  X  B. Received by (Printed Name)	☐ Agent ☐ Addressee  C. Date of Delivery
or on the front if space permits.  1. Article Addressed to:  Ryan & Amanda Christinsur  3008 S. 147 S.	D. Is delivery address different from If YES, enter delivery address b	item 1? ☐ Yes elow: ☑ No
(11/2) NI 3343		
9590 9402 2799 7069 1570 88  2 A Viola Number (Transfer from service label). 7017 1450 0000 7569 6053	3. Service Type  Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail® Collect on Delivery Collect on Delivery Collect on Delivery I all Restricted Delivery	☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restrict Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation Gignature Confirmation Restricted Delivery