SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Print your name and address on the reverse	COMPLETE THIS SECTION ON DELIVERY	
	A. Signature	☐ Agent ☐ Addressee
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.	B. Received by (Printed Name)	C. Date of Delivery
Hoch Salinas 813 W Histoir Mitchell Acides W. W. Salinas	D. Is delivery address different from Item 1? If YES, enter delivery address below: No	
liter ul		38
9590 9402 5674 9346 5783 05	3. Service Type Adult Signature Adult Signature Restricted Delivery Certifled Mall® Certifled Mail Restricted Delivery Collect on Delivery Felivery Restricted Delivery	☐ Priority Mall Express®☐ Registered Mall™☐ Registered Mall Restricted Delivery ☐ Return Receipt for Merchandise☐ Signature Confirmation ☐ Signat