Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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.

1. Article Addressed to:
   A. Signature
   B. Received by (Printed Name)  
   C. Date of Delivery

2. Article Number  
   (Transfer from service label)

3. Service Type
   - Certified Mail
   - Express Mail
   - Registered
   - Return Receipt for Merchandise
   - Insured Mail
   - C.O.D

4. Restricted Delivery? (Extra Fee)  
   - Yes
   - No

Send to
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

Postmark Here

PS Form 3811, February 2004  
Domestic Return Receipt  102595-02-M-1540

For delivery information visit our website at www.usps.com