

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Mr. Robert L. Belveal
43475 County Rd 30
Matheson, CO 80830



9590 9402 2778 6351 4615 03

2. Article Number (Transfer from service label)

7017 0530 0001 0459 9481

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Robert L. Belveal

☐ Agent☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-8-18

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery