## COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. **Agent** ■ Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: D. Is delivery address different from item 1? If YES, enter delivery address below: Nelson Ralph Carl 7961 VAlmont Dr Builder Co 80301-4805 Service Type □ Priority Mail Express® ☐ Adult Signature □ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for ☐ Adult Signature Restricted Delivery □ Certified Mail® 9590 9402 5565 9249 0078 44 ☐ Certified Mail Restricted Delivery Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery 2. Article Number (Transfer from service label) ☐ Signature Confirmation ☐ Insured Mail Restricted Delivery ☐ Insured Mail Restricted Delivery 019 0700 0000 2481 4553 (over \$500) PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt