

SENDER: COMPLETE THIS SECTION

- 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:

Charles Athey
(b) (7)(C)

2. Article Number
(Transfer from service label)

7009 2820 0003 5155 5525

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X (b) (7)(C) Agent Addressee

B. RECEIVED BY MAILMAN NAME
(b) (7)(C) Yes No

C. Date of Delivery
8-9-10

Delivery address below:

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

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

