| ■ 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. | Signature |
|--|-----------|
| 2. Article Number (Transfer from service label) 7014 0510 0001 5481 1235 PS Form 3811, July 2013 Domestic Return Receipt | |