SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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.	A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery
	3. Service Type
2. Article Number	Ties I les
(Transfer from service label) 7011 0110 00	01 8269 9192
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540