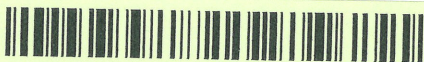


SENDER: COMPLETE THIS SECTION

- 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 **GAVIN J CURTIS**
2950 CAMERON RD
MOSCOW ID 83843



9590 9403 0913 5223 3890 64

2 Article Number (Transfer from service label)

7012 3050 0001 2131 9180

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x

BG

☐ Agent

☐ Addressee

B. Received by (Printed Name)

RJ

C. Date of Delivery

5-30

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

C19

3. Service Type

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

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

Domestic Return Receipt