

**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:

Gary C Hawkins  
9 Cooper Mtn Rd  
Salmon ID 83467

## 2. Article Number

(Transfer from service label)

7002 3150 0005 3816 3767

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

X *Gary C Hawkins* ☒ Agent ☐ Addressee

## B. Received by (Printed Name)

LIVON HAWKINS

## C. Date of Delivery

1-27-06

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☒ No

## 3. Service Type

☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes