

## 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. Article Addressed to:

60-02L (1833) 24196-H  
DOMINIC PITZEL  
11100 BROADWAY  
CROWN POINT IN 46307

NH



9590 9402 3350 7227 2803 39

## 2 Article Number (Transfer from service label)

7017 2400 0000 0746 7232

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *[Signature]*

- ☐ Agent  
☐ Address

## B. Received by (Printed Name)

## C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

DELIVERED 4-23-2022

## 3. Service Type

- |                                                                  |                                                                     |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                         | <input type="checkbox"/> Registered Mail Restricti                  |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Delivery                                   |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation                     |
| <input type="checkbox"/> Restricted Delivery                     | <input type="checkbox"/> Signature Confirmation Restricted Delivery |