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.	COMPLETE THIS SECTION ON DELIVERY A. Signature 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
Prestige Moving & Storage Co. 7930 SW Burns Way, Unit A Wilsonville, OR 97070	STATE COMM
9590 9402 3786 8032 1871 35	3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery □ Insured Mail □ Restricted Delivery □ Insured Mail □ Restricted Delivery □ Signature Confirmation □ Signature Confirmation □ Restricted Delivery
3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Domestic Return Receipt