SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature    Agent   Addressee     Addres
Ben's Moving & Delivery Services, Inc. 2730 197th PL SW Lynnwood, WA 98036-4954	CB SEB
9590 9402 3786 8032 1865 27  2. Article Number ( <i>Transfer from service label</i> )  7015 1730 0000 6002 505	3. Service Type
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt