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. ■ Received by (Printed Name) ■ C. Date of D.		☐ Insured Mall ☐ C.O.D.
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: Age Add		Certified Mail
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 mailplece, or on the front if space permits. 1. Article Addressed to: Age	B & Z Moving LLC	
SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY	 SENDER: COMP'=TE THIS SECTION Complete item, 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 malipiece, or on the front if space permits. 	A. Signature X. Agent Addressee B. Received by (Printed Name) C. Date of Delivery Cachary Grap 73 My 3 D. Is delivery address different from Item 1? Yes