

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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.

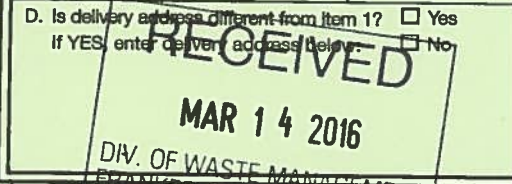
A. Signature  
 Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery

1. Article Addressed to:

Billy Bowles  
 2700 Winchester Rd  
 Irving, KY 40336

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



A1998 5WEN 20160001 RY

3. Service type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7013 3020 0001 0603 1005