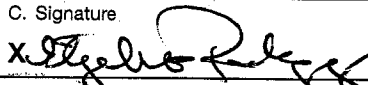


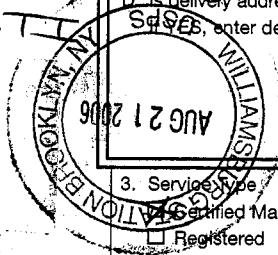
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<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (<i>Please Print Clearly</i>) B. Date of Delivery	
1. Article Addressed to: <u>060466-TT</u> DPC 232 Broadway Brooklyn, NY 11211-6250	C. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee D. Is delivery address different from item P? <input type="checkbox"/> Yes <i>SEES</i> , enter delivery address below: <input type="checkbox"/> No	
2. Article Number (<i>Transfer from service label</i>)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes	
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