## ORIGINAL

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 revers so that we can return the card to you.  Attach this card to the back of the mailpie or on the front if space permits.  1. Article Addressed to: Olongo	C. Signature  C.
Elizabeth NJ 07201-1030	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	002 0860 0001 1755 4459
PS Form 3811, March 2001 Do	omestic Return Receipt 102595-01-M-1424

DSC-02-1443-PAA-TI

AUS CAF CMP COM CTR ECR GCL OPC MMS SEC OTH

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