	CTNAMBUG ON AND
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 malipiece, or on the front if space permits.	X August Smull Addressee  R. Received by (Printed Name) C. Date of Delivery  HCCN D. Smith 12/10/9  D. la delivery printess different from item 12 ☐ Yes
1. Article Addressed to:	D. le delivery address different from item 1? Yes  If YES, enter delivery address below: No
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09-809-TR-CVF	4. Restricted Delivery? (Entire ee) 17 Yes
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