

# SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

DEROCCHIS, PETER  
3 HESS COURT  
MOUNDSVILLE WV 26041-1016

2. Article Number

(Transfer from service label)

# COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Peter De Rocchis*

☐ Agent

☒ Addressee

B. Received by (Printed Name)

Peter De Rocchis

C. Date of Delivery

7-18-09

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☐ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ G.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

09-520-TR-LVF

7007 0220 0000 2272 5367