



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature</p> <p>X <u>M3C1A</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
<p>ELIAS DANIEL TRUSTEE 4/8 PITCH PINE LANE NOMINEE TR 27 TOWER RD LINCOLN, MA 01773</p>	<u>M3C1A</u>	<u>02-11-20</u>
 9590 9402 7617 2122 0938 48	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<p>7022 2410 0002 6613 1119</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 567-17 Domestic Return Receipt</p>		

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1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
<p>BENSON MARGUERITE TRUSTEE MARGUERITE BENSON NOM TRUST 2126 CONNECTICUT AVE NW #54 WASHINGTON, DC 20008</p>		
 9590 9402 7617 2122 0938 24	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<p>7022 2410 0002 6613 0204</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 567-17 Domestic Return Receipt</p>		