SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>Mr. Russell A. Badders Beggs &amp; Lane</li> <li>501 Commendencia Street Pensacola FL 32502</li> </ul> </li> </ul>	A Signature  A Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  ACHIMIC  D. Is delivery address different from item 1?  If YES, enter delivery address below:
	3. Service Type  Certified Mail Registered Insured Mail C.O.D.
09047-2017	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7017 0530	0 0001 1254 2769
	eturn Receipt 102595-02-M-154