11 JUN 24 AM 8: 53

COMMISSION CLERK

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 mailpiece, or on the front if space permits. 1. Article Addressed to: 	A. Signature X
SNiP Link, L.L.C. Peter Cava 100-A Twinbridge Drive Pennsauken NJ 08110-4207	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
110012-TI PSC-11-0260. PAA-TI	4. Restricted Delivery? (Extra Fee)
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