

**SENDER: COMPLETE THIS SECTION**

- 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, **EH** or on the front if space permits.

**1. Article Addressed to:**

Alfredo & Lilitiana Castro  
 186 Rosebud St  
 Spring Lake NC 28390



9590 9402 9488 5069 6254 42

**2. Article Number (Transfer from service label)**

7019 0700 0000 1036 0170

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

L. L. Castro

C. Date of Delivery

9/16/25

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No**3. Service Type**

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

 Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Signature Confirmation™ Signature Confirmation Restricted Delivery

