NDER: 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:

2. Article Number

(Transfer from service label) PS Form 3811, July 2013

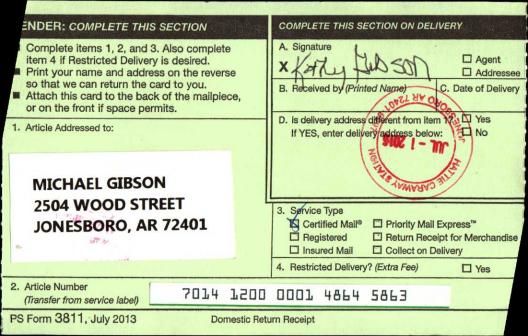
NI CHAO KONG 309 DUNWOODY DRIVE JONESBORO, AR 72404

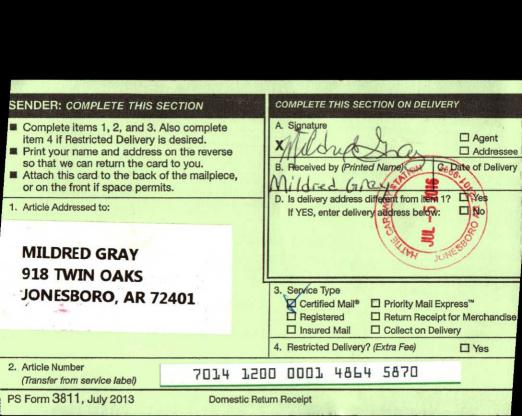
COMPLETE THIS SECTION ON DELIVERY

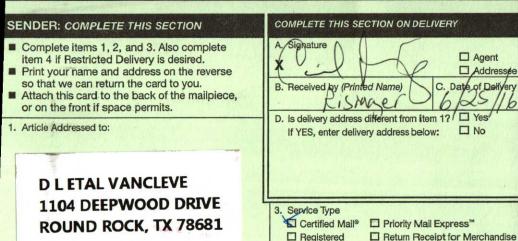
A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery 130116 1 Yes D. Is delivery address different from item 1? If YES, enter delivery address below: C No 3. Service Type Certified Mail® □ Priority Mail Express[™] C Registered Return Receipt for Merchandise Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) □ Yes 1200 0001 4864 5993

Domestic Return Receipt

701.4







2. Article Number (Transfer from service label)

7014 1200 0001 4864 5986

Insured Mail

4. Restricted Delivery? (Extra Fee)

Collect on Delivery

T Yes

PS Form 3811, July 2013

Domestic Return Receipt

