

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>Village of Bald Head Island, C/o Village Manager 106 Lighthouse Wynd Bald Head Island, North Carolina 28461</p>		<p>B. Received by (Printed Name) JAE KIM</p> <p>C. Date of Delivery 4/7/22</p>	
<p>9590 9402 6133 0209 2791 36</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label) 7019 1120 0001 4895 0318</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>A-41521 4/4/22 Domestic Return Receipt</p>	