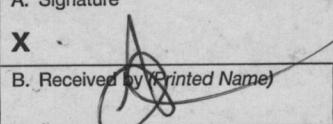


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Yes C. Date of Delivery <input type="checkbox"/> No 11/10/25</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No </p>	
<p>1. Article Addressed to:</p> <p>Fahed Sayegh 1226 Sonoma Dr Altadena, CA 91101</p> <p> 9590 9402 9542 5121 5007 14</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>d Mail d Mail Restricted Delivery (500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 2649 4328 50</p>			

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

<p>USPS TRACKING# ARITA CA 913</p> <p> 9590 9402 9542 5121 5007 14</p> <p>United States Postal Service</p>		<p>First-Class Mail Postage & Fees Paid USPS Permit No. G-10</p>
<p>• Sender: Please print your name, address, and ZIP+4® in this box*</p> <p>Kirk A. Kolodji, Esq. 35 N. Lake Ave, Ste 710 Pasadena, CA 91101</p>		

