

SENDER: COMPLETE THIS SECTION	A Cinnetura
 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. 	A. Signature X. Agent Addresse B. Received by (Printed Name) C. Date of Deliver
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Telecents Communications, Inc. Legal Department 8615 Richardson Rd., Suite 200 Walled Lake, MI 48390	3. Service Type X Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number	0 0009 3699 7401
(Transfer from service label) 7099 322	