

 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature X Betty Communication □ Agent □ Addresse
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.	B. Received by (Finted 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
PO BOX 432 WESTBROOK ME 04098 102 NOO	37.8
DE 274 DOLG	3 Service Type 3 Service Type Certified Mail
RE: 2/4 BUID	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	1000 0001 1000

Domestic Return Receipt

(Transfer from service label)
PS Form 3811, February 2004

7013 1090 0002 1737 6977

102595-02-M-1540