(Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt	2. Article Number 7002 3150 0000 8389 0507	London, OH 43140	P.O. Box 69	Thomas Massey 545-241	1. Article Addressed to:	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.	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	SENDER: COMPLETE THIS SECTION
turn Receipt #1/7 102595-02-M-1540	0 8389 0507 13-574 1988	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	3. Service Type		D. Is delivery address different from item 1? Was if YES, enter delivery address below:	B. Received by (<i>Printed Name</i>) C. Date of Delivery	A. Signature ☐ Agent X ☐ Addressee	COMPLETE THIS SECTION ON DELIVERY