

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Demetress Arlene Burnett
23 Towne Commons Way
#24
Cincinnati, OH 45215

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X
- B. Received By (Printed Name) Agent Addressee
- C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below: Yes No

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

7010 3090 0000 8524 5655

Yes

2. Article Number
(Transfer from service label)

Domestic Return Receipt

11-327

SAS

PS Form 3811, August 2001

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