

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Tom and Karen Bass
 205 Charolais Dr.
 Lawndale, NC 28090



9590 9402 5137 9092 8843 89

2. Article Number (Transfer from service label)

7019 1120 0000 5073 2835

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *B. Lee*

- Agent
- Addressee

B. Received by (Printed Name)

RFC

C. Date of Delivery

7-2-20

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

6/29/2020 - 89

Domestic Return Receipt

OFFICIAL COPY

JUL 07 2020