

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
	─ D. Is delivery address different from item 1? ☐ Yes
Article Addressed to:	If YES, enter delivery address below: ☐ No
CT Corporation System	If YES, enter delivery address below: ☐ No
	3. Service Type  Certified Mail

PS Form 3811, August 2001

Domestic Return Receipt