

ORIGINAL

0538

**SENDER:**  
 • Complete items 1 and/or 2 for additional services  
 • Complete items 3, 4a, and 4b.  
 • Print your name and address on the reverse of this form so that we can return this card to you.  
 • Attach this form to the front of the mailpiece, or on the back if space there is not possible.  
 • Write "Return Receipt Requested" on the mailpiece below the article number.  
 • The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):  
 1  Addressee's Address  
 2  Restricted Delivery  
 Consult postmaster for fee

4a Article Number  
 [REDACTED] 11 216

4b Service Type  
 Registered  Certified  
 Express Mail  Insured  
 Return Receipt for Merchandise  COD

7 Date of Delivery

8 Addressee's Address (only if important and has to post)

5. Received By (Print Name)  
 Pauline Quarcoo

6. Signature (Addressee or Agent)  
 X [Signature]

PS Form 3811, December 1994 Domestic Return Receipt

is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

- ACK \_\_\_\_\_
- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- LIN \_\_\_\_\_
- OPR \_\_\_\_\_
- RCH \_\_\_\_\_
- SEC
- WAS \_\_\_\_\_
- STP \_\_\_\_\_

104551-4