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PS Form 3811, July 1999

Article Number (Copy from service label)

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Domestic Return Receipt

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## SENDER: COMPLETE THIS SECTION Article Addressed to: Cabin John MD Kevin McGilly Yourīel Telecom Corpo Complete items 1, 2, and 3. Also complete 7945 MacArthur Attach this card to the back of the mailpiece, so that we can return the card to you. Print your name and address on the reverse or on the front if space permits. item 4 if Restricted Delivery is desired. Suite 214 tion D. Is delivery address different from item 1? × C. Signature A. Received by (Please Print Clearly) | B. Date of Delivery COMPLETE THIS SECTION ON DELIVERY If YES, enter delivery address below: C.O.D. Express Mail Return Receipt for Merchandise <del>Z</del> ₹ ☐ Agent☐ Addressee

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