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<ul style="list-style-type: none">■ 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.	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
<p>1. Article Addressed to:</p> <p>Dkt 20220091-TL DNs 02892-2022, 03494-2022</p> <p>MS. TRACY W. HATCH AT&T FLORIDA 150 S. MONROE ST., STE 400 TALLAHASSEE, FL 32301</p>  <p>9590 9402 6460 0346 1558 82</p>	B. Received by (Printed Name) C. Date of Delivery C. P. J. 8-2-22
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0001 8211 4852</p>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery

Domestic Return Receipt