Is your RETURN ADDRESS completed on the reverse side?

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 does not permit.
- 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.

3. Article Addressed to:

CO-B6
9/1+9/7

Carolyn S. Lutz
3000 Lambert Drive
Mesquite, TX 75150

4a. Article Number: 0004 6087 3776

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

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*

X

TX FIN STA 750
NO MESQUITE
SEP 20 2000

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt

Thank you for using Return Receipt

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

7099 3220 0004 6087 3776

Article Sent To:

Postage	$ .55
Certified Fee	1.40
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	1.25
Total Postage & Fees	$ 3.20

Postmark Here

CC203

WASH, DC L'ENFANT PLAZA STA
SEP 11 2000
USPS

Name (Please Print Clearly) (To be completed by mailer)
Carolyn S. Lutz

Street, Apt. No.; or PO Box No.
3000 Lambert Drive

City, State, ZIP+4
Mesquite, TX 75150

PS Form 3800, July 1999 See Reverse for Instructions