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:

00-156 10/23+10/24

Carolyn S. Lutz
2508 Valley Forge
Richardson, TX 75080

4a. Article Number

0004 6087 3974

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*

X Carolyn S. Lutz

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

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

Thank you for using Return Receipt Service.

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

7099 3220 0004 6087 3974

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

HCR03 00-156 10/23+10/24

Postmark Here

00M-58

Name (Please Print Clearly) (To be completed by mailer)
Carolyn S. Lutz
Street, Apt. No.; or PO Box No.
2508 Valley Forge
City, State, ZIP+4
Richardson, TX 75080

PS Form 3800, July 1999 See Reverse for Instructions