

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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.

1. Article Addressed to:

**THOMAS O GILLIS  
THOMAS GILLIS  
1153 COPPER VERDE LANE  
MODESTO, CA 95355-8955**

2. Article Number

(Transfer from service label)

7006 3450 0000 0503 4555

PS Form 3811, February 2004

Domestic Return Receipt

02595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**Environmental Health Services  
Environmental Protection  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577  
Attn: Jerry, RO# 41**

Environmental Health

FEB 19 2008

Alameda County

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*N. Gillis*

Agent

Addressee

B. Received by (Printed Name)

NANCY GILLIS

C. Date of Delivery

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes



MOR L -  
2008-02-19

