

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>John Blazich</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 5px auto;"> Cissy Ung 3006 Bartlett Street Oakland, CA 94602-3660 </div>		B. Received by (Printed Name) <i>John Blazich</i>	
2. Article Number (Transfer from service label) 000271		C. Date of Delivery <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013		Domestic Return Receipt	

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

For delivery information visit our website at usps.com

OFFICE

Postage \$ _____
Certified Fee _____
Return Receipt (Endorsement Fee) _____
Restricted Delivery (Endorsement Fee) _____

Postmark Here

Cissy Ung
3006 Bartlett Street
Oakland, CA 94602-3660

000271

City, State, and ZIP+4®

See Reverse for Instructions

PS Form 3800, August 2006

7011 3500 0003 1935 1634