

7110 3500 0003 1848 1660

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 Visit our website at www.usps.com

FOR OFFICIAL USE

Return Receipt (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. No. or PO Box No. **003248**
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

THE HOME OF TRUTH OF ALAMEDA
 1300 GRAND STREET
 ALAMEDA, CA 94501

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
 THE HOME OF TRUTH OF ALAMEDA
 1300 GRAND STREET
 ALAMEDA, CA 94501

2. Article Number (Transfer from service label) **7011 3500 0003 1848 1660**

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery

Address different from item 1? Yes
 delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt

