**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

**SAMPLE**

2. Article Number *(Transfer from service label)*

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature

  X

- B. Received by *(Printed Name)*

- C. Date of Delivery

- D. Is delivery address different from item 1?
  - Yes
  - No

- 3. Service Type

  - Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Insured Mail
  - Insured Mail Restricted Delivery (over $500)

- 4. Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt
• Sender: Please print your name, address, and ZIP+4® in this box.