

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
 \$ _____
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ _____
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postmark
 Here

Postage
 \$ _____
 Total \$ _____

#22-333

Sent
 Street
 City

JOHN DEBLASIO & UTE DEBLASIO
3087 SETH ROAD
NORTH PORT FL 34288

CE-MR

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 2720 0001 5608 4902

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:

#22-333
 JOHN DEBLASIO & UTE DEL
 3087 SETH ROAD
 NORTH PORT FL 34288

CE-MR



9590 9402 7380 2028 4034 50

2. Article Number (Transfer from service label)

7021 2720 0001 5608 4902

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *DeBlasio* Agent Addressee

B. Received by (Printed Name) *DeBlasio* C. Date of Delivery *7/4*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Registered Mail
 Registered Mail Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt