
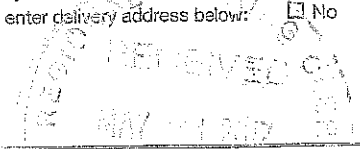
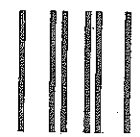


EPRA 05  
2017 0016

SENDER: COMPLETE THIS SECTION	RECIPIENT: COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Address  B. Received by (Printed Name) C. Date of Delivery	
1. Article Addressed to: Mark Ayles District Building Engineer YMCA 194 East 6th Street St. Paul, MN 55101	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:  3. Service Type U.S. ENVIRONMENTAL <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input checked="" type="checkbox"/> G.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number 7009 1680 0000 7647 3903 (Transfer from serv)		

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-10

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
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• Sender: Please print your name, address, and ZIP+4 in this box •

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