

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ 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.		A. Signature X <u>SANTER</u> ☐ Agent ☐ Addressee	
1. Article Addressed to: <u>Colonel Charles A. Jones</u> <u>1970 West Broad St</u> <u>Columbus, OH 43223</u>		B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
9590 9402 6549 1028 0822 32		3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☐ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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	\$4.15
Extra Services & Fees (check box, add fee as appropriate)	\$13.75
☐ Return Receipt (hardcopy)	\$0.00
☐ Return Receipt (electronic)	\$0.00
☐ Certified Mail Restricted Delivery	\$0.00
☐ Adult Signature Required	\$0.00
☐ Adult Signature Restricted Delivery	\$0.00
Postage	\$2.94
Total Postage and Fees	\$10.44
Postmark Here FEB 13 2023 02/13/2023	
Sent To <u>Colonel Charles A. Jones</u> Street and Apt. No., or PO Box No. <u>1970 West Broad St</u> City, State, ZIP+4® <u>Columbus, OH 43223</u>	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	