

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. **CH**

1. Article Addressed to:

Jason + Shay Sturgill
 302 Thomas Ave
 Lillington, NC 27546



9590 9402 5927 0049 0707 75

2. Article Number (Transfer from service label)

7019 2970 0000 1863 5769

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

SS Sturgill **Received**

 Agent Addressee

B. Received by (Printed Name)

SS Sturgill

C. Date of Delivery

*5/1/12*D. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

 Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Return Receipt for Merchandise Signature Confirmation™ Signature Confirmation Restricted Delivery Insured Mail Insured Mail Restricted Delivery (over \$500)

USPS TRACKING #



7 MAY 2022 PM 3 L

9590 9402 5927 0049 0707 75

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

**United States
Postal Service**

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

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH SECTION
307 W. CORNELIUS HARNETT BOULEVARD
LILLINGTON, NC 27546

6-933507

