SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.

13 LOS T. 150

- 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:

ayt Mary Ashwoth ON Mill Rd Fliquey Varing Ne 27526

9590 9402 5927 0049 0708 67

- 2. Article Number (Transfer from service label)
- 7019 2970 0000 1863 5745

COMPLETE THIS SECTION ON DELIVERY

A. Signature □ Agent ☐ Addressee

B., Received by (Printed Name) Date of Delivery

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

- 3. Service Type ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- Certified Mail® □ Certified Mail Restricted Delivery ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery 'nsured Mail
 - nsured Mail Restricted Delivery over \$500)

- □ Priority Mail Express®
- □ Registered Mail™ □ Registered Mail Restricted
- Delivery
- Return Receipt for Merchandise ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

USPS TRACKING#





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

9590 9402 5927 0049 0708 67

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

- Որդոնսինինիրիիրիինընինըիիրիրիրիրիրիին