## 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:

Jeffrey + Cinty Sink HIS Hancock St Clymer, PA 15728



2. Article Number (Transfer from service label)

7019 2970 0000 1863

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent ☐ Addressee C. Date of Delivery

B. Received by (Printed Name)

☐ Yes

D. Is delivery address different from item 1?

If YES, enter delivery address below:

3. Service Type ☐ Adult Signature

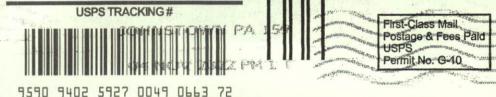
☐ Adult Signature Restricted Delivery Certified Mail® □ Certified Mail Restricted Delivery

☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail

ured Mail Restricted Delivery er \$500)

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

Restricted Delivery Domestic Return Receipt



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

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