

 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 Addressee B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?
AIRS ID#00901562 nd Cert 05 PLAZA CLEANERS 754 Apollo Blvd MELBOURNE, FL 32935	3. Service Type
•	B Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
	398
PS Form 3811, August 2001 Domestic Re	turn Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

U.S. Postal Service™ CERTIFIED MAIL RECEIPT 98 (Domestic Mail Only; No Insurance Coverage Provided) 40 For delivery information visit our website at www.usps.com@ m Postage 5000 Certified Fee **Postmark** Return Receipt Fee Here (Endorsement Required) 510 Restricted Delivery Fee (Endorsement Required) ПЦ AIRS ID#0090156....2nd Cert 05 PLAZA CLEANERS 4002 Sent To 754 Apollo Blvd MELBOURNE, FL 32935 Street, Ap. or PO Box City, State