



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:

REZ-2025-11
CHAMBERS ALAN & PAIGE
4645 RUSTIC RIDGE ROAD
VALDOSTA, GA 31602

COMPLETE THIS SECTION ON DELIVERY

A. Signature		☒ Agent
B. Received by (<i>Printed Name</i>)		☐ Addressee
C. Date of Delivery		
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		



9590 9402 9133 4225 8303 34

2. Article Number (*Transfer from service label*)

9589 0710 5270 2431 0686 70

Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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	