SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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.  Article Addressed to: 14-066 L.H.  Mn. Mns. Krand and Ann Eurng 12-1 Olivia Street  Let west, Florida 33040	A. Signature  X
2. Article Number 7013	2630 0000 9565 5767
PS Form 3811, July 2013 Domestic Re	turn Receipt

767	U.S. Postal Service A CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
52	For delivery information visit our website at www.usps.com	
LC)	OFFICIAL USE	
30 0000 956	Restricted Delivery Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	
ᄪ	Total Postage & Fees \$ 6	
7013	Site of April 19 1 April 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	RS Form 3800 August 2004 See Reverse for Instructions	