

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Debra Parks</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Debra Parks</i></p> <p>C. Date of Delivery <i>8-25-14</i></p> <p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>FIDELITY COMMUNICATIONS 64 CLARK ST. SULLIVAN, MD 63080</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
		<p>7008 0150 0000 6220 2737</p>	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

**U.S. Postal Service™
 CERTIFIED MAIL™ RECEIPT**
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.49	\$0.49	0601
Certified Fee	3.70	\$3.70	08/22/2014
Return Receipt Fee (Endorsement Required)	2.70	\$2.70	Postmark Here
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$6.89	\$6.89	08/22/2014

Sent To
FIDELITY COMMUNICATIONS
 Street, Apt. No., or PO Box No. **64 CLARK ST**
 City, State, ZIP+4 **SULLIVAN, MD 63080**

PS Form 3800, August 2006 See Reverse for Instructions

7008 0150 0000 6220 2737