

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.

cc-24-471-noh *

MARC & ANDREA SHERRY
3740 S OCEAN BLVD APT 403
Highland Beach FL, 33487



9590 9402 5086 9092 0367 92

Article Number (Transfer from service label)

9589 0710 5270 2251 9506 74

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Marc Sherry Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING #



WEST PALM BCH FL 334

18 DEC 2024 PM 2 L

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 5086 9092 0367 92

• Sender: Please print your name, address, and ZIP+4® in this box•

TOWN OF HIGHLAND BEACH
CODE COMPLAINE
3616 S OCEAN BLVD
HIGHLAND BEACH, FL 33487

RECEIVED

DEC 20 2024

United States
Postal Service
Town of Highland Beach, FL
Town Clerk's Office

