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-24-451 NOH ROBERT J & MARIA G BRAVERMAN 32 OLD STONE XING WEST SIMSBURY CT 06092

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery

> ddress different from item 1? ☐ Yes r delivery address below: П No



2 Article Number (Transfer from service label)

0710 5270 1410

3. Service Type ☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail® ☐ Certified Mail Restricted Delivery

☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery

> ured Mail ured Mail Restricted Delivery er \$500)

☐ Priority Mail Express® ☐ Registered Mail™

□ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

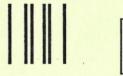
☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

Return Receipt

PS Form 3811, July 2015 PSN 7530-02-000-9053

USPS TRACKING#





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

9590 9402 \$086 9092 0351 22

United States
Postal Service

DEC 23

wn of Highland E

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

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

հգիկոիվիրիհիրդնես (կրությիլիկիի) դոլինիայի