

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:

JAMES & YVONNE STEWART TRS
 30 GALE AVE
 LONG BEACH CA 90810-2855
 RB/JP CEMJ268666 6406 LONG BEACH BLVD ACW



9590 9402 5684 9346 8759 06

2.

7019 0700 0002 2093 4307

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X 2-4

B. Received by (Printed Name)

CELA 1010

C. Date of Delivery

3-23

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

~~STEWART TRS~~
CODE ENFORCEMENT

MAR 27 2020

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

Domestic Return Receipt