

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
- 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.		A. Signature X <i>PH</i>	
1. Article Addressed to: OSCAR HERNANDEZ 1717 LAUREL AVE MERCED CA 95341		B. Received by (Printed Name) C-35 COVID-19	C. <i>07-22</i>
2. Article Number (Transfer from service label) 7019 2280 0001 8296 8001		D. Is delivery address different from item 1? If YES, enter delivery address below:	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ <i>1.00</i> <i>(17)</i> Extra Services & Fees (check box, add fee as appropriate) ☐ Return Receipt (hardcopy) \$ ☐ Return Receipt (electronic) \$ ☐ Certified Mail Restricted Delivery \$ ☐ Adult Signature Required \$ ☐ Adult Signature Restricted Delivery \$ Postage <i>10/2/2020</i> Total Price \$ Sent To OSCAR HERNANDEZ Street Address 1717 LAUREL AVE City, State, ZIP+4® MERCED CA 95341	Postmark Here
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

THE UNIVERSITY OF CHICAGO