SENDER:	 	CTION

- 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:

LELAND W. WHITE 501 PURYEAR ST JONESBORO AR 72401



9590 9402 8278 3094 9110 64

2.	Article Number (Transfer from service label)					☐ Col
	9589	0710	5270	0.90	0173	14

COMPLETE THIS SECTION ON DELIVERY

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

☐ Yes D le deliver address different from item 1? r delivery address below: ☐ No

☐ Adult Signature Restricted Delivery

Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery

ail Restricted Delivery

□ Priority Mail Express® ☐ Registered Mail™

☐ Registered Mail Restricted Delivery □ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

o. Ocivios type

☐ Adult Signature

Certified Mail®



City of Jonesboro *Office of Code Enforcement*P.O. Box 1845
Jonesboro, AR 72403

CERTIFIED MAIL*



9589 0710 5270 0630 0173 14

LELAND W. WHITE

70401 DEC 1N

-R-T-S- 72401-RFS-1N

08/25/23

RETURN TO SENDER UNABLE TO FORWARD UNABLE TO FORWARD RETURN TO SENDER

