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:

HOPE FEDERAL CRED UNION 4 OLD RIVER PLACE SUITE A JACKSON, MS 39201



9590 9402 8970 4064 2790 00

2 Article Number (Transfer from contine labor)

0710 5270 1221 1981

☐ Adult Signature Restricted Delivery Certified Mail®

☐ Certified Mail Restricted Delivery ☐ Collect on Delivery

Collect on Delivery Restricted Delivery

all Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature

B. Received by (Printed Name)

C. Date of Delivery

☐ Agent

☐ Addressee

D. Is delivery address different from item 1? ☐ Yes If VFS enter delivery address below: □ No

> ☐ Priority Mail Express® ☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

(over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt