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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION O
 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 anela Crano Agent Addressee B. Received by (Printed Name) C. Date of Delivery Fallela Crane 3-3-21
Bryan Russell, Superintendent Valley View Schools 2131 Valley View Drive Jonesboro, AR 72404	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery
7020 1810 0000 5111 703	☐ Collect on Delivery Restricted Delivery Grant
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

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Debra Mangrum 4503 Southwest Drive Jonesboro, AR 72404