

Tracking Number: 70192970000004472125

Status

Delivered

September 4, 2020 at 12:07 pm  
Delivered, Front Desk/Reception/Mail Room  
SMYRNA, GA 30080

Get Updates

Your item was delivered to the front desk, reception area,  
or mail room at 12:07 pm on September 4, 2020 in  
SMYRNA, GA 30080.

Delivered

BRICKSE, J

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

SMYRNA, GA 30080

Certified Mail Fee	\$3.55
Extra Services & Fees (check box, add fee as appropriate)	\$7.85
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$1.60
<b>Total Postage and Fees</b>	<b>\$8.00</b>

0013  
07  
SEP 02 2020  
Postmark Here  
09/02/2020  
THREE ST. MILLEN, GA 30089-9998

Sent To J C Brickse 11  
Street and Apt. No., or PO Box No.  
3194 Northview  
City, State, ZIP+4®  
30080-4445

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7019 2970 0000 0447 2125

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:

J. Brickse  
3194 Northview Pl SE  
Smyrna, GA 30080-4445



9590 9402 5307 9154 0361 04

2. Article Number (Transfer from service label)

7019 2970 0000 0447 2125

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

J. Brickse  Agent  
 Addressee

B. Received by (Printed Name)

J. Brickse

C. Date of Delivery

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

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 checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input checked="" 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 |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

Tracking Number: 7019297000004472088

Status

In-Transit

Your package will arrive later than expected, but is still on its way. It is currently in transit to the next facility.

September 8, 2020  
In Transit, Arriving Late

Get Updates ▼

In-Transit

DICENSO, P & L

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Conrad P</i>  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>Conrad P</i></p> <p>C. Date of Delivery</p>																
<p>1. Article Addressed to:</p> <p>P + L Dicenso  1445 Collier Dr. SE  Smyrna, GA 30080-4474</p>  <p>9590 9402 5307 9154 0169 15</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<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 checked="" 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	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<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 checked="" 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																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

7019 2970 0000 0447 2088

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Smyrna, GA 30080

**OFFICIAL USE**

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee else appropriate)	\$2.95	07
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$1.60	
Total Postage and Fees	\$8.00	

POST OFFICE  
Postmark Here  
SEP 02 2020  
09/02/2020

Sent To  
P & L Dicenso  
Street and Apt. No., or PO Box No.  
1445 Collier  
City, State, ZIP+4®  
Smyrna, GA 30080-4474

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**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:

B. J. Haisten/E Deeter  
 1453 Collier Dr. SE  
 Smyrna, GA 30080-4474



9590 9402 5307 9154 0159 70

2. Article Number (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *David A*  Agent  
 Addressee

B. Received by (Printed Name)

*David A*

C. Date of Delivery

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

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 checked="" type="checkbox"/> Certified Mail Restricted Delivery | <input checked="" 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 |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

Tracking Number: 9590940253079154015970

Status

**Delivered**

Your item was delivered in or at the mailbox at 6:34 pm on September 11, 2020 in ATLANTA, GA 30309.

September 11, 2020 at 6:34 pm  
 Delivered, In/At Mailbox  
 ATLANTA, GA 30309

Get Updates

Delivered

HAISTEN, B J & DEETER, E

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)™.

Smyrna, GA 30080

**OFFICIAL USE**

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee, add postage)

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | \$2.85 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | \$0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | \$0.00 |

Postage \$1.60

Total Postage and Fees \$8.00

Sent To

B. J. Haisten / E Deeter 11  
 Street and Apt. No., or PO Box No.  
 1453 Collier  
 City, State, ZIP+4®  
 30080-4474



7019 2970 0000 0447 2064



HARRIS, R E

7019 2970 0000 0447 2002

U.S. Postal Service™  
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Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

SMYRNA, GA 30080

Certified Mail Fee	\$3.55	
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$1.60	
<b>Total Postage and Fees</b>	<b>\$8.00</b>	

Postmark Here: SEP 02 2020

Sent To: Rachel E Harris 11  
Street and Apt. No. or PO Box No.: 1481 Memory  
City, State, ZIP+4®: 30080-4441

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Tracking Number: 70192970000004472002

Status

✓ Delivered

Your item was delivered to the front desk, reception area, or mail room at 11:56 am on September 4, 2020 in SMYRNA, GA 30080.

September 4, 2020 at 11:56 am  
Delivered, Front Desk/Reception/Mail Room  
SMYRNA, GA 30080

Get Updates ▼

Delivered

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Conrad</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>																	
<p>1. Article Addressed to:</p> <p>Rachel E. Harris            1481 Memory Ln. SE            Smyrna, GA 30080-4441</p> <p>9590 9402 5307 9154 0379 65</p>	<p>B. Received by (Printed Name)  <i>Conrad</i></p>	<p>C. Date of Delivery</p>																
	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>																	
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" 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	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																	
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																	
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																	
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" 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																	
<input type="checkbox"/> Insured Mail																		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																		

INGRAM, R S

7019 2970 0000 0447 2026

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee	\$3.55	
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$1.60	
<b>Total Postage and Fees</b>	<b>\$5.00</b>	

Postmark Here  
**02 2020**

09/02/2020

Sent To **Ronald S Ingram** 11  
 Street and Apt. No., or PO Box No. **1480 Memory**  
 City, State, ZIP+4® **30080-4442**

PS Form 3800, April 2015 PSN 7530-2-000-9047 See Reverse for Instructions

**Tracking Number:** 70192970000004472026

**Status**

**Delivered**

Your item was delivered to the front desk, reception area, or mail room at 11:51 am on September 4, 2020 in SMYRNA, GA 30080.

September 4, 2020 at 11:51 am  
Delivered, Front Desk/Reception/Mail Room  
SMYRNA, GA 30080

[Get Updates](#) ▼

**Delivered**

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to: <b>Ronald S. Ingram</b> <b>1480 Memory Ln.</b> <b>Smyrna, GA 30080-4442</b></p> <div style="text-align: center;"> <p>9590 9402 5307 9154 0155 74</p> </div> <p>2. Article Number (Transfer from service label)</p>	<p>A. Signature <b>X</b> <i>Covid 19</i> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <b>Covid 19</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" 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	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" 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																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

Tracking Number: 70192970000004471982

Status

In-Transit

Your package will arrive later than expected, but is still on its way. It is currently in transit to the next facility.

September 8, 2020  
In Transit, Arriving Late

Get Updates 

In-Transit

KOENIG, C & K

U.S. Postal Service™  
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Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Smyrna GA 30080

OFFICIAL USE

7019 2970 0000 0447 1982

Certified Mail Fee	\$3.55
Extra Services & Fees (check box, add fees as appropriate)	\$7.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$1.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.60

Total Postage and Fees \$8.00



Sent To Chad & Kathryn Koening 11

Street and Apt. No., or PO Box No. 1471 Memory

City, State, ZIP+4® 30080-4441



Tracking Number: 7019297000004472149

MASON, R & S

Status

In-Transit

Your package will arrive later than expected, but is still on its way. It is currently in transit to the next facility.

September 8, 2020  
In Transit, Arriving Late

Get Updates 

In-Transit

**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:

R + S Mason  
3184 Northview Pl SE  
Smyrna, GA 30080-4445



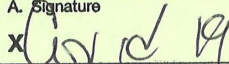
9590 9402 5307 9154 0379 41

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

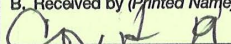
A. Signature

X 

Agent

Addressee

B. Received by (Printed Name)



C. Date of Delivery

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 Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Smyrna, GA 30080

Certified Mail Fee	\$3.55	
Extra Services & Fees (check box, add fee as appropriate)		\$2.85
<input type="checkbox"/> Return Receipt (hardcopy)	\$	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00

Postage \$1.60

Total Postage and Fees \$8.00

Sent To R + S Mason

Street and Apt. No., or PO Box No. 3184 Northview  
City, State, ZIP+4® 30080-4445

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

6702 2970 0000 0447 2149



SPENCER, E L

7019 2970 0000 0447 2040

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**SMYRNA, GA 30080**

**OFFICIAL USE**

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)		07
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$1.60	
<b>Total Postage and Fees</b>	<b>\$8.00</b>	

Sent To: **E L Spencer** 11  
 Street and Apt. No. or PO Box No.: **1463 Collier**  
 City, State, ZIP+4®: **30080-4474**

Postmark Here: **SEP 02 2020**  
 09/02/2020

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Tracking Number: 70192970000004472040

Status

Your item was delivered to the front desk, reception area, or mail room at 11:47 am on September 4, 2020 in SMYRNA, GA 30080.

**Delivered**

September 4, 2020 at 11:47 am  
Delivered, Front Desk/Reception/Mail Room  
SMYRNA, GA 30080

Get Updates

Delivered

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <b>Cond 19</b> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>																	
1. Article Addressed to: <b>E. L. Spencer</b> <b>1463 Collier Dr. SE</b> <b>Smyrna, GA 30080-4474</b>	B. Received by (Printed Name) <b>Cond 19</b>	C. Date of Delivery																
9590 9402 5307 9154 0155 67 2. Article Number (Transfer from service label)	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>																	
<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>			<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 checked="" 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	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<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 checked="" 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																	
<input type="checkbox"/> Insured Mail																		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																		

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt



Tracking Number: 7019297000004471975

SWITZER, MRS D

Status


Delivered

Your item was delivered to the front desk, reception area, or mail room at 12:00 pm on September 4, 2020 in SMYRNA, GA 30080.

September 4, 2020 at 12:00 pm  
Delivered, Front Desk/Reception/Mail Room  
SMYRNA, GA 30080

Get Updates

Delivered

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p><i>Mrs. Dewey Switzer</i>  <i>1461 Memory Ln.</i>  <i>Smyrna, GA 30080</i></p>  <p>9590 9402 5307 9154 0155 98</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" 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	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)	<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" 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																
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)																
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p>																	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>																

7019 2970 0000 0447 1975

U.S. Postal Service™  
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 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

SMYRNA, GA 30080

**OFFICIAL USE**

Certified Mail Fee	\$3.55	Extra Services & Fees (check box, add fee as appropriate)	\$2.85
		<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
		<input type="checkbox"/> Return Receipt (electronic)	\$0.00
		<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
		<input type="checkbox"/> Adult Signature Required	\$0.00
		<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$1.60		
Total Postage and Fees	\$5.00		

Sent To *Mrs. Dewey Switzer* 12

Street and Apt. No., or PO Box No. *1461 Memory*

City, State, ZIP+4® *30080-4611*

Postmark Here: 02 2020

09/02/2020

ATLANTA, GA 31109-9998

PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions

WARFEL, C C & P C

**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:  
 CC + PC Warfel  
 1425 Collier Dr.  
 Smyrna, GA 30080-4407

9590 9402 5307 9154 0169 08

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *David 19*  Agent  
 Addressee

B. Received by (Printed Name)  
 David 19

C. Date of Delivery  
 09/10/19

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

3. Service Type  Priority Mail Express®  
 Adult Signature  Registered Mail™  
 Adult Signature Restricted Delivery  Registered Mail Restricted Delivery  
 Certified Mail®  Return Receipt for Merchandise  
 Certified Mail Restricted Delivery  Signature C  
 Collect on Delivery  Signature C  
 Insured Mail  Signature Restricted  
 Insured Mail Restricted Delivery (over \$500)

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Smyrna, GA 30080

Certified Mail fee \$3.55

Extra Services & Fees (check box, add fees to postage rates)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.60

Total Postage and Fees \$8.00

Postmark Here: SEP 02 2020

Sent To CC + PC Warfel 11

Street and Apt. No., or PO Box No. 1425 Collier

City, State, ZIP+4® 30080-4407

PS Form 3806, July 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Tracking Number: 70192970000004472101

Status

In-Transit

Your package will arrive later than expected, but is still on its way. It is currently in transit to the next facility.

September 8, 2020  
In Transit, Arriving Late

Get Updates ✓

In-Transit

Tracking Number: 7019297000004472163

Status

Delivered

Your item was delivered to the front desk, reception area, or mail room at 12:04 pm on September 4, 2020 in SMYRNA, GA 30080.

September 4, 2020 at 12:04 pm  
Delivered, Front Desk/Reception/Mail Room  
SMYRNA, GA 30080

Get Updates

Delivered

WATSON, K G & H L

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>KG</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery  <i>KG</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:  <i>KG + HL Watson          3174 Northview          Smyrna GA 30080-4445</i></p>		<p>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 checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Insured Mail <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>9590 9402 5307 9154 0379 58</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

7019 2970 0000 0447 2163

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Smyrna, GA 30080

**OFFICIAL USE**

Certified Mail Fee	\$3.55		0013
Extra Services & Fees (check box, add fee as appropriate)		\$7.85	07
<input type="checkbox"/> Return Receipt (hardcopy)	\$	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00	
Postage	\$1.60		
Total Postage and Fees	\$8.00		

Postmark Here  
 02 2020  
 09/02/2020

Sent To *KG + HL Watson 11*  
 Street and Apt. No., or PO Box No.  
*3174 Northview*  
 City, State, ZIP+4®  
*30080-4445*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions