

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:

26206

Waterford Town Clerk
Waterford Town Hall
15 Rope Ferry Road
Waterford, CT 06385



9590 9402 0010 6058 0627 12

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6297 42

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

red Mail
red Mail Restricted Delivery
\$500

Domestic Return Receipt

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1. Article Addressed to:

26206

Bozrah Town Clerk
Bozrah Town Hall
1 River Road
Bozrah, CT 06334



9590 9402 0010 6058 0626 44

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6296 81

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

red Mail
red Mail Restricted Delivery
\$500

Domestic Return Receipt

PLACE STICKER TOP TO THE RIGHT
OF THE RETURN ADDRESS

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

2622C6

Ledyard Town Clerk
Ledyard Town Hall
741 Colonel Ledyard Highway
Ledyard, CT 06339



9590 9402 0010 6058 0626 75

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6297 04

PS Form 3811, July 2020 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail Restricted Delivery (\$500)

Domestic Return Receipt

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1. Article Addressed to:

2622C6

East Lyme Town Clerk
East Lyme Town Hall
P.O. Box 519
Niantic, CT 06357



9590 9402 0010 6058 0626 68

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6296 98

PS Form 3811, July 2020 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail Restricted Delivery (\$500)

Domestic Return Receipt

PLACE STICKER TOP TO THE RIGHT
OF THE RETURN ADDRESS

PLACE STICKER TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AND TAP HERE TO
OPEN ENVELOPE.

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.
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1. Article Addressed to: **262CB**

Preston Town Clerk
Preston Town Hall
389 Route 2
Preston, CT 06365



9590 9402 0010 6058 0626 99

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6297 28

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☐ Addressee
- X**
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Adult Signature Restricted Mail®
- ☐ 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
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

PLACE STICKER TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AND TAP HERE TO
OPEN ENVELOPE.

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: **262CB**

Norwich City Clerk
Norwich City Hall
100 Broadway, Room 215
Norwich, CT 06360



9590 9402 0010 6058 0626 82

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6297 11

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☐ Addressee
- X**
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Adult Signature Restricted Mail®
- ☐ 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
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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1. Article Addressed to:

26206

Salem Town Clerk
Salem Town Hall
270 Hartford Road
Salem, CT 06420



9590 9402 0010 6058 0627 05

2. Article Number (Transfer from service label)

9589 0710 5270 2386 6297 35

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COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Certified Mail Restricted Delivery
☐ Certified Mail Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation
☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery

☐ Mail ☐ Mail Restricted Delivery (500)

Domestic Return Receipt

Certified Mail

- A receipt (this portion of the mailpiece)
- A unique identifier for you or your business
- Electronic verification of delivery
- A record of delivery (including signature) that is retained for a specified period.

Important Reminders:

- You may purchase Certified Mail® or Priority Mail® service.
- Certified Mail service is not available for international mail.
- Insurance coverage is not available for certain Priority Mail items.
- For an additional fee, and endorsement on the mailpiece, return receipt services.
- Return receipt services of delivery (including the hard copy or electronic version). For a complete PS Form 3811, Receipt attach PS Form 3800, January 20