

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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: 8/19/10 B.M.
PCB 2010-071
Joseph Asselta
Agovino & Asselta, LLP
170 Old Country Road
Suite 608
Mineola, NY 11501

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 3273

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J. Scholl*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

J. Scholl

DATE OF DELIVERY
AUG 26 2010

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

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

☐ Express Mail

☐ Return Receipt for Merchandise

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

102595-02-M-1540