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:

The Honorable Robert J. Lister
Mayor, City of Portsmouth
Portsmouth City Hall
1 Junkins Avenue
Portsmouth, NH 03801-4511

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Barbara Mace

☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Deliver

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes
☐ No

PORTSMOUTH NH AUG 20 2010 USPS

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandis
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7013 3020 0000 1337 1355

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-154