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PRIORITY MAIL EXPRESS®



CUSTOMER USE ONLY PHONE (303 518-218) FROM: (PLEASE PRINT) PAYMENT BY ACCOUNT (if applicable) Federal Agency Acct. No. or Postal Service™ Acct. No. ORIGIN (POSTAL SERVICE USE ONLY) □ DPO ☐ Military 2-Day 1-Day PO ZIP Code Scheduled Delivery Date Postage (MM/DD/YY) **CELIVERY OPTIONS (Customer Use Only)** SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's Date Accepted (MM/DD/YY) **Scheduled Delivery Time** COD Fee Insurance Fee mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery. ☐ 6:00 PM **Delivery Options** ☐ No Saturday Delivery (delivered next business day) Sunday/Holiday Delivery Required (additional fee, where available\*) Time Accepted Return Receipt Fee Live Animal \*Refer to USPS.com® or local Post Office™ for availability. □ AM Transportation Fee ☐ PM TO: (PLEASE PRINT) CLE Special Handling/Fragile Sunday/Holiday P Total Postage & Fees mium Fee ☐ Flat Rate Weight Acceptance Emp (POSTAL SERVICE USE ONLY) Delivery Attempt (MM/DD/YY) Time Employee Signature □ AM □ PM For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811. Employee Signature Delivery Attempt (MM/DD/YY) Time ■ \$100.00 insurance included. □ AM □ PM

PEEL FROM THIS CORNER

LABEL 11-B, NOVEMBER 2023

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