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Certified Mail Fee

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- Return Receipt (hardcopy) \$ \_\_\_\_\_
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- Certified Mail Restricted Delivery \$ \_\_\_\_\_
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Postage

Total Postage and Fees

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City, State, Zip+4®

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

See Reverse for Instructions



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**CERTIFIED MAIL**



7018 2290 0000 6497 6368

*Dennis & Maria Ortko  
4322 Gullstream Parkway  
Cape Coral, FL 33992*