

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:

David Cassidy & David Kelly
 Po Box 3197
 Pecten Beach, CA 92881
 #91020 - Inland



9590 9402 4323 8190 3415 94

For use from service label

7013 2630 0001 8450 8110

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name)

[Handwritten Name]

C. Date of Delivery

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail (Limit up to \$500)
- Insured Mail Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

RECEIVED

DEC 19 2018

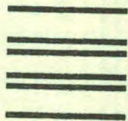
Mail Center

United States
Postal Service

9590 9402 4323 8190 3415 94



USPS TRACKING #



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box•

Louisiana Board of Tax Appeals
P.O. Box 3217
Baton Rouge, LA 70821-3217

FILED

DEC 19 2018

Board of Tax Appeals
State of Louisiana

