

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees

Postmark Here

7004 1160 0000 2622 8276

JUL 20 2016

SPS HAMPSHIRE FIN (N.C.) MD 20791

Sent to
Street Apt No. or PO Box No.
City, State, Zip+4

Hyde County Board of Education
1430 Main Street
Swan Quarter, NC 27885

PS Form 3800, June 2002 See Reverse for Instructions

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:

Hyde County Board of Education
1430 Main Street
Swan Quarter, NC 27885

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
B. Received by (Printed Name) Addressee
C. Date of Delivery 7/22/16
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
PO Box 217
Swan Quarter, NC, 27885

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.
- Restricted Delivery? (Extra Fee)
- Yes
- No

2. Article Number
(Transfer from service label)

7004 1160 0000 2622 8276

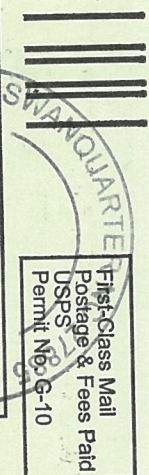
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

NC 275
27211-1165



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

• Sender, please print your name, address, and ZIP+4 in this box •

Alexander Sanyev's
Federal Communications Commission
445 12th Street, SW
Washington, DC 20554

Received & Inspected
JUL 28 2016
FCC Mail Room

20554