



+		1A <input type="checkbox"/> +
<b>Registered No.</b>		<b>Date Stamp</b>
To Be Completed By Post Office	Postage \$	Extra Services & Fees (continued)
	Extra Services & Fees	<input type="checkbox"/> Signature Confirmation \$
	<input type="checkbox"/> Registered Mail \$	<input type="checkbox"/> Signature Confirmation Restricted Delivery \$
	<input type="checkbox"/> Return Receipt (hardcopy) \$	<b>Total Postage &amp; Fees</b> \$
	<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Restricted Delivery \$		
Customer Must Declare Full Value \$		Received by
		Domestic Insurance up to \$50,000 is included based upon the declared value. International Indemnity is limited. (See Reverse).
<b>OFFICIAL USE</b>		
To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	FROM	
	TO	
PS Form <b>3806, Registered Mail Receipt</b>		Copy 1 - Customer
April 2015, PSN 7530-02-000-9051		(See Information on Reverse)
For domestic delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®		