


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature <input checked="" type="checkbox"/> <i>Eugene M. Arnot</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: FOIA OFFICERS, HOULTON SECTOR US CUSTOMS + BORDER PROTECTION 96 CALAIS ROAD HODGDON, ME 04730		B. Received by (Printed Name) C. Date of Delivery	
 9590 9402 3028 7124 4446 54		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7016 2710 0001 1427 1888		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail-Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <small>(over \$500)</small>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature <input checked="" type="checkbox"/> JAN 30 2018 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: FOIA OFFICER US CUSTOMS + BORDER PROTECTION 1300 PENNSYLVANIA AVE, NW ROOM 3.3D WASHINGTON, DC 20229		B. Received by (Printed Name) C. Date of Delivery FOIA DIVISION JAN 29 2018 CRDSMA	
 9590 9402 3028 7124 4446 47		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7016 2710 0001 1427 1895		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <small>(over \$500)</small>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
WASHINGTON, DC 20229	
OFFICIAL USE	
Certified Mail Fee \$ 3.45	0104 11
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ 2.75 <input type="checkbox"/> Return Receipt (electronic) \$ 0.00 <input type="checkbox"/> Certified Mail Restricted Delivery \$ 0.00 <input type="checkbox"/> Adult Signature Required \$ 0.00 <input type="checkbox"/> Adult Signature Restricted Delivery \$ 0.00	
Postage \$ 0.71	
Total Postage and Fees \$ 6.91	
Sent To FOIA OFFICERS, US CUSTOMS + BORDER PROTECTION 1300 PENNSYLVANIA AVE, NW, ROOM 3.3D WASHINGTON, DC 20229	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
HOULTON, ME 04730	
OFFICIAL USE	
Certified Mail Fee \$ 3.45	0104 11
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ 2.75 <input type="checkbox"/> Return Receipt (electronic) \$ 0.00 <input type="checkbox"/> Certified Mail Restricted Delivery \$ 0.00 <input type="checkbox"/> Adult Signature Required \$ 0.00 <input type="checkbox"/> Adult Signature Restricted Delivery \$ 0.00	
Postage \$ 0.71	
Total Postage and Fees \$ 6.91	
Sent To FOIA OFFICERS, HOULTON SECTOR / BORDER PROTECTION 96 CALAIS ROAD HODGDON, ME 04730	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7016 2710 0001 1427 1888

7016 2710 0001 1427 1888