7009 0080 0001 9669 7240

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™

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U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

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OFFICIAL USE

Postage $

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees $

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Sent To

Street, Apt. No.; or PO Box No.

City, State, ZIP+4

Dayshawn Owens
FCI Loretto
Post Office Box 1000
Loretto, PA 15940
2:05cr4-1 Doc #106
2:08cv102 Doc #2

PS Form 3800, August 2006

See Reverse for Instructions