

7017 1450 0002 1799 0207

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

NW-B  
Pre-App  
Postmark  
Here  
North Metro  
Fire District

Postage	\$
Total Postage and Fees	\$

Sent To

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

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Constance  
Postmark  
Here  
NW-B  
Pre-App

Postage	\$
Total Postage and Fees	\$

Sent To

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

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:  
Northwest Metro Fire Rescue District  
101 Lamar St  
Broomfield, CO, 80020



9590 9402 3196 7166 5378 57

2. Article Number (Transfer from service label)  
7017 1450 0002 1799 0207

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 Addressee  
 Agent

B. Received by (Printed Name) C. Date of Delivery

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

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 |
| <input type="checkbox"/> Certified Mail Restricted Delivery (\$500) |   |

Domestic Return Receipt

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:  
Charles & Loretta Constance  
15675 Pecos St  
Broomfield, CO, 80023



9590 9402 3196 7166 5378 64

2. Article Number (Transfer from service label)  
7017 1450 0002 1799 0214

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 Addressee  
 Agent

B. Received by (Printed Name) C. Date of Delivery  
Charles Constance-201

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

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 |
| <input type="checkbox"/> Certified Mail Restricted Delivery (\$500) |   |

Domestic Return Receipt

## Track Another Package +

**Tracking Number:** 70171450000217990207

Remove X

Your item was delivered to an individual at the address at 11:40 am on January 29, 2018 in BROOMFIELD, CO 80020.

### **Delivered**

January 29, 2018 at 11:40 am  
Delivered, Left with Individual  
BROOMFIELD, CO 80020

Get Updates 

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**Text & Email Updates**



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**Tracking History**



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**Product Information**



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**See Less** 

## Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

**FAQs** (<http://faq.usps.com/?articleId=220900>) **How can I help you?**