

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

For delivery information, visit our website at www.usps.com.
Boston, MA 02108

OFFICIAL USE

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee as appropriate)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<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	\$8.55
Total Postage and Fees	\$15.35

Postmark Here
DEC 29 2021
12/29/2021

Sent To:
MA State Treasurer Deborah Goldberg
Office of the Treasurer
One Ashburton Place, 12th Floor
Boston, MA 02108

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.
Boston, MA 02114

OFFICIAL USE

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee as appropriate)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<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	\$8.55
Total Postage and Fees	\$15.35

Postmark Here
DEC 29 2021
12/29/2021

Sent To:
MA Commissioner Geoffrey Snyder
MA Dept. of Revenue
100 Cambridge St.
Boston, MA 02114

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.
Boston, MA 02108

OFFICIAL USE

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee as appropriate)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<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	\$8.55
Total Postage and Fees	\$15.35

Postmark Here
DEC 29 2021
12/29/2021

Sent To:
MA Attorney General Maura Healy
Office of the MA Atty. General
One Ashburton Place
Boston, MA 02108

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.
Boston, MA 02133

OFFICIAL USE

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee as appropriate)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<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	\$8.55
Total Postage and Fees	\$15.35

Postmark Here
DEC 29 2021
12/29/2021

Sent To:
MA Governor Charles Baker
Massachusetts State House, 24 Beacon St.
Office of the Governor, Room 280
Boston, MA 02133

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

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
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For delivery information, visit our website at www.usps.com.
Hartford, CT 06103

OFFICIAL USE

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee as appropriate)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<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	\$8.55
Total Postage and Fees	\$15.35

Postmark Here
DEC 29 2021
12/29/2021

Sent To:
Commissioner Mark Boughton
CT Dept. of Revenue Services
450 Columbus Blvd, Suite 1
Hartford, CT 06103

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.
Hartford, CT 06106

OFFICIAL USE

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee as appropriate)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<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	\$8.55
Total Postage and Fees	\$15.35

Postmark Here
DEC 29 2021
12/29/2021

Sent To:
Secretary of the Treasury Shawn Wooden
CT Office of the Treasurer
165 Capitol Ave Ste 2000
Hartford, CT 06106

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.
New Britain, CT 06051

Certified Mail Fee	\$ 3.75
Postage	\$ 8.55
Total Postage and Fees	\$ 15.35

Return Receipt (hardcopy) \$ 0.00
 Return Receipt (electronic) \$ 0.00
 Certified Mail Restricted Delivery \$ 0.00
 Adult Signature Required \$ 0.00
 Adult Signature Restricted Delivery \$ 0.00

Extra Services & Fees (check box, add fee if appropriate)
Postage \$ 8.55
Total Postage and Fees \$ 15.35

Postmark Here
DEC 29 2021
USPS

Sent To: CT Attorney General William Tong
Office of the CT Attorney General
10 Franklin Sq
City, State, ZIP+4
New Britain, CT 06051

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.
Washington, DC 20002

Certified Mail Fee	\$ 3.75
Postage	\$ 8.85
Total Postage and Fees	\$ 15.65

Return Receipt (hardcopy) \$ 0.00
 Return Receipt (electronic) \$ 0.00
 Certified Mail Restricted Delivery \$ 0.00
 Adult Signature Required \$ 0.00
 Adult Signature Restricted Delivery \$ 0.00

Extra Services & Fees (check box, add fee if appropriate)
Postage \$ 8.85
Total Postage and Fees \$ 15.65

Postmark Here
DEC 29 2021
USPS

Sent To: IRS Commissioner Charles Rettig
Internal Revenue Service
77 K Street NE
City, State, ZIP+4
Washington, DC 20002

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.
Washington, DC 20530

Certified Mail Fee	\$ 3.75
Postage	\$ 8.85
Total Postage and Fees	\$ 15.65

Return Receipt (hardcopy) \$ 0.00
 Return Receipt (electronic) \$ 0.00
 Certified Mail Restricted Delivery \$ 0.00
 Adult Signature Required \$ 0.00
 Adult Signature Restricted Delivery \$ 0.00

Extra Services & Fees (check box, add fee if appropriate)
Postage \$ 8.85
Total Postage and Fees \$ 15.65

Postmark Here
DEC 29 2021
USPS

Sent To: US Attorney General William Barr
Office of the US Attorney General
950 Pennsylvania Ave NW Ste 7141
City, State, ZIP+4
Washington, DC 20530

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.
Hartford, CT 06106

Certified Mail Fee	\$ 3.75
Postage	\$ 8.55
Total Postage and Fees	\$ 15.35

Return Receipt (hardcopy) \$ 0.00
 Return Receipt (electronic) \$ 0.00
 Certified Mail Restricted Delivery \$ 0.00
 Adult Signature Required \$ 0.00
 Adult Signature Restricted Delivery \$ 0.00

Extra Services & Fees (check box, add fee if appropriate)
Postage \$ 8.55
Total Postage and Fees \$ 15.35

Postmark Here
DEC 29 2021
USPS

Sent To: CT Governor Ned Lamont
Office of the CT Governor, State Capitol
210 Capitol Ave
City, State, ZIP+4
Hartford, CT 06106

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.
Washington, DC 20220

Certified Mail Fee	\$ 3.75
Postage	\$ 8.85
Total Postage and Fees	\$ 15.65

Return Receipt (hardcopy) \$ 0.00
 Return Receipt (electronic) \$ 0.00
 Certified Mail Restricted Delivery \$ 0.00
 Adult Signature Required \$ 0.00
 Adult Signature Restricted Delivery \$ 0.00

Extra Services & Fees (check box, add fee if appropriate)
Postage \$ 8.85
Total Postage and Fees \$ 15.65

Postmark Here
DEC 29 2021
USPS

Sent To: US Secretary of the Treasury Janet Yellen
U.S. Department of the Treasury
1500 Pennsylvania Avenue, NW
City, State, ZIP+4
Washington, DC 20220

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.
Washington, DC 20500

Certified Mail Fee	\$ 3.75
Postage	\$ 8.85
Total Postage and Fees	\$ 15.65

Return Receipt (hardcopy) \$ 0.00
 Return Receipt (electronic) \$ 0.00
 Certified Mail Restricted Delivery \$ 0.00
 Adult Signature Required \$ 0.00
 Adult Signature Restricted Delivery \$ 0.00

Extra Services & Fees (check box, add fee if appropriate)
Postage \$ 8.85
Total Postage and Fees \$ 15.65

Postmark Here
DEC 29 2021
USPS

Sent To: President Joseph Biden
The White House
1600 Pennsylvania Ave
City, State, ZIP+4
Washington, DC 20500

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.
Washington, DC 20530

OFFICIAL USE

Certified Mail Fee \$3.75 \$3.05
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$8.85
 \$
 Total Postage and Fees \$15.65
 \$

Sent to US Inspector General Michael Horowitz
US Dept. of Justice, Office of Inspector General
950 Pennsylvania Ave. NW
City, State, ZIP+4 Washington, DC 20530-0001

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

0089
06
FELD MA 01089
Postmark Here
DEC 29 2021
WEST ST
12/29/2021
USPS

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

For delivery information, visit our website at www.usps.com.
Washington, DC 20543

OFFICIAL USE

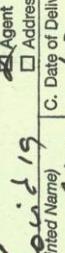
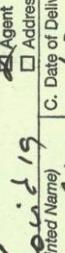
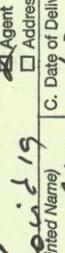
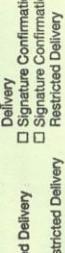
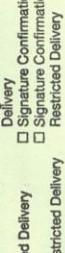
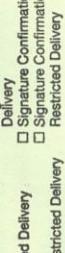
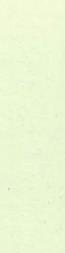
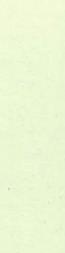
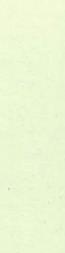
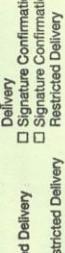
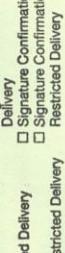
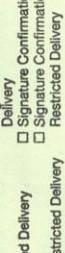
Certified Mail Fee \$3.75 \$3.05
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$15.50
 \$
 Total Postage and Fees \$22.30
 \$

Sent to Clerk of Court Scott Harris
Supreme Court of the United States
1 First St, NE
City, State, ZIP+4 Washington, DC 20543

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

0089
06
FELD MA 01089
Postmark Here
DEC 29 2021
12/29/2021
USPS

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY			
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>Article Addressed to:</p>		<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>Secretary of the Treasury Shawn Wooden CT Office of the Treasurer 165 Capitol Ave Ste 2000 Hartford, CT 06106</p> <p>Article Number (Transfer from service label) 020 3160 0001 4683 2294</p> <p>Form 3811, July 2020 PSN 7530-02-000-9053</p>			
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>Article Addressed to:</p>		<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>CT Attorney General William Tong Office of the CT Attorney General 10 Franklin Sq New Britain, CT 06051</p> <p>Article Number (Transfer from service label) 020 3160 0001 4683 2287</p> <p>Form 3811, July 2020 PSN 7530-02-000-9053</p>			
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>Article Addressed to:</p>		<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>MA Commissioner Geoffrey Snyder MA Dept. of Revenue 100 Cambridge St Boston, MA 02114</p> <p>Article Number (Transfer from service label) 7019 0160 0000 9363 5361</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>			
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>Article Addressed to:</p>		<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>MA Governor Charles Baker Massachusetts State House, 24 Beacon St. Office of the Governor, Room 280 Boston, MA 02133</p> <p>Article Number (Transfer from service label) 7020 3160 0001 4682 2134</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>			
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>Article Addressed to:</p>		<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>MA Governor Charles Baker Massachusetts State House, 24 Beacon St. Office of the Governor, Room 280 Boston, MA 02133</p> <p>Article Number (Transfer from service label) 7020 3160 0001 4682 2134</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>			

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

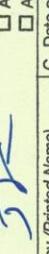
Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Commissioner Mark Broughton
CT Dept. of Revenue Services
450 Columbus Blvd, Suite 1
Hartford, CT 06103

RECEIVER: COMPLETE THIS SECTION

A. Signature 

B. Received by (Printed Name) **C. 19**

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below: **11/5**

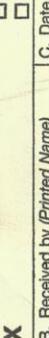
Priority Mail Express®
Registered Mail™
Priority Mail Restricted Delivery
Certified Mail®
Priority Mail Restricted Delivery
Signature Confirmation™
Signature Confirmation
Restricted Delivery
Collect on Delivery
Insured Mail
Insured Mail Restricted Delivery
Insured Mail
Insured Mail Restricted Delivery
Over \$500

Article Number (Transfer from service label)
1020 3160 0001 4683 2300

Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION ON DELIVERY

A. Signature 

B. Received by (Printed Name) **X**

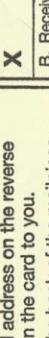
C. Date of Delivery **JAN 1 0 REC'D**

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

President Joseph Biden
The White House
1600 Pennsylvania Ave
Washington, DC 20500

RECEIVER: COMPLETE THIS SECTION ON DELIVERY

A. Signature 

B. Received by (Printed Name) **X**

C. Date of Delivery **JAN 1 0 REC'D**

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

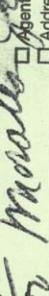
Priority Mail Express®
Adult Signature
Adult Signature Restricted Delivery
Certified Mail®
Certified Mail Restricted Delivery
Collect on Delivery
Insured Mail
Insured Mail Restricted Delivery
Over \$500

Article Number (Transfer from service label)
1160 0001 4682 2127

Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION ON DELIVERY

A. Signature 

B. Received by (Printed Name) **Horowitz**

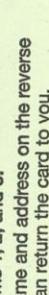
C. Date of Delivery **1/6/2022**

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

US Inspector General Michael Horowitz
US Dept of Justice, Office of Inspector General
950 Pennsylvania Ave NW
Washington, DC 20530-0001

RECEIVER: COMPLETE THIS SECTION ON DELIVERY

A. Signature 

B. Received by (Printed Name) **Maura Healy**

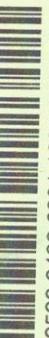
C. Date of Delivery **JAN 04 2022**

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

MA Attorney General Maura Healy
Office of the MA Atty. General
One Ashburton Place
Boston, MA 02108

RECEIVER: COMPLETE THIS SECTION ON DELIVERY

A. Signature 

B. Received by (Printed Name) **MAURA HEALY**

C. Date of Delivery **19 0160 0001 4684 0404**

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

Priority Mail Express®
Registered Mail™
Priority Mail Restricted Delivery
Certified Mail®
Priority Mail Restricted Delivery
Signature Confirmation™
Signature Confirmation
Restricted Delivery
Collect on Delivery
Insured Mail
Insured Mail Restricted Delivery
Over \$500

Article Number (Transfer from service label)
9590 9403 0350 5163 4113 58

Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION				RECIPIENT: COMPLETE THIS SECTION			
<p>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. Article Addressed to:</p>				<p>A. Signature <input checked="" type="checkbox"/> X</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> JAN - 5 2022</p> <p>C. Date of Delivery <input checked="" type="checkbox"/> 1/12/22</p> <p>D. Is delivery address different from service below? If YES, enter delivery address below: <input type="checkbox"/> No</p>			
<p>Clerk of Court Scott Harris Supreme Court of the United States 1 First St, NE Washington, DC 20543</p> <p>RECEIVED U.S. Department of the Treasury 1500 Pennsylvania Avenue, NW Washington, DC 20220</p> <p>JAN - 5 2022 OFFICE OF THE CLERK SUPREME COURT, U.S.</p> <p>9590 9402 6991 1225 317815</p> <p>7020 3160 0001 4602 2103</p>				<p>A. Signature <input checked="" type="checkbox"/> X</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> SARA H. KIM</p> <p>C. Date of Delivery <input checked="" type="checkbox"/> 1/12/22</p> <p>D. Is delivery address different from service below? If YES, enter delivery address below: <input type="checkbox"/> No</p>			
<p>S Form 3811, July 2020 PSN 7530-02-000-9053</p>				<p>Domestic Return Receipt</p>			
COMPLETE THIS SECTION ON DELIVERY							
<p>■ 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. Article Addressed to:</p>				<p>A. Signature <input checked="" type="checkbox"/> X</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> MAR 22 2022</p> <p>C. Date of Delivery <input checked="" type="checkbox"/> 3/22/22</p>			
<p>US Secretary of the Treasury Janet Yellen U.S. Department of the Treasury 1500 Pennsylvania Avenue, NW Washington, DC 20220</p> <p>RECEIVED</p> <p>FEB 2022</p> <p>9590 9403 0350 5163 4314 55</p> <p>7019 0160 0001 4363 5354</p>				<p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> No</p>			
<p>PS Form 3811, April 2015 PSN 7530-02-000-9053</p>				<p>Domestic Return Receipt</p>			
COMPLETE THIS SECTION ON DELIVERY							
<p>■ 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. Article Addressed to:</p>				<p>A. Signature <input checked="" type="checkbox"/> X</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> FEB 23 2022</p> <p>C. Date of Delivery <input checked="" type="checkbox"/> 2/23/22</p>			
<p>IRS Commissioner Charles Rettig Internal Revenue Service 77 K Street NE Washington, DC 20002</p> <p>RECEIVED</p> <p>Executive Secretariat</p> <p>9590 9402 6991 1225 3179 21</p> <p>7020 3160 0001 4603 2263</p>				<p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> No</p>			
<p>S Form 3811, July 2020 PSN 7530-02-000-9053</p>				<p>Domestic Return Receipt</p>			
COMPLETE THIS SECTION ON DELIVERY							
<p>■ 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. Article Addressed to:</p>				<p>A. Signature <input checked="" type="checkbox"/> X</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> MA State Treasurer Deborah Goldberg</p> <p>C. Date of Delivery <input checked="" type="checkbox"/> 1/12/22</p>			
<p>MA State Treasurer Deborah Goldberg Office of the Treasurer One Ashburton Place, 12th Floor Boston, MA 02108</p> <p>RECEIVED</p> <p>9590 9402 6991 1225 3178 39</p> <p>7019 0160 0001 4363 5354</p>				<p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> No</p>			
<p>S Form 3811, July 2020 PSN 7530-02-000-9053</p>				<p>Domestic Return Receipt</p>			

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. 		<p>A. Signature</p> <p>X <i>Conn 15</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Conn 15</i> C. Date of Delivery <i>12-30</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>CT Governor Ned Lamont Office of the CT Governor, State Capitol 210 Capitol Ave Hartford, CT 06106</p> <p></p> <p>9590 9402 6991 1225 3179 14</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Insured Mail <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) <input type="checkbox"/> Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7020 3160 0001 4683 2270</p>		<p>Domestic Return Receipt</p>	

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