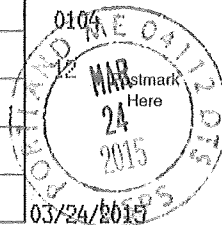


U.S. Postal Service™  
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FALMOUTH ME 04105

Postage	\$ 0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$ 6.49</b>



7010 1870 0002 8136 7179

Sent To **JOSEPH WOJCIK JR**  
 Street, Apt. No.,  
 or PO Box No. **211 FALMOUTH RD**  
 City, State, ZIP+4 **FALMOUTH ME 04105**

PS Form 3800, August 2006

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

**JOSEPH B WOJCIK JR**  
**211 FALMOUTH ROAD**  
**FALMOUTH ME 04105**

**RE: 010 E001**  
**INSP**

2. Article Number

(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*x Barbara A Wojcik*  Agent  Addressee

B. Received by (Printed Name)

*BARBARA A WOJCIK* 3/26/15

C. Date of Delivery

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

3. Service Type

- Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

7010 1870 0002 8136 7179