

**CERTIFIED MAIL™**

*A Remarkable City,  
Community for Life*

**PORTLAND  
DIVISION**

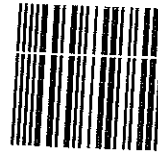
Post Office  
315  
Portland, ME 04101-3509



7013 1090 0002 1737 6304



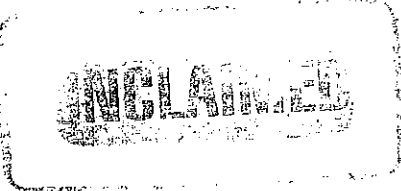
1000



04101

U.S. POSTAGE  
PAID  
PORTLAND, ME  
04101  
OCT 10 2013  
AMOUNT

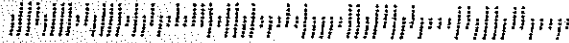
**\$6.11**  
00030274-03



Stephens Clark B  
31 Oxford St  
Portland, ME 04101

*BNA*  
*10-16*  
*10-26*

04101\$2582 C166



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

**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:

Steven Clark  
31 Oxford St  
Portland, ME 04103

**013 B007001**

2. Article Number

*(Transfer from service label)*

7013 1090 0002 1737 6304

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

Agent

Addressee

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

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (*Extra Fee*)

Yes