

U.S. Postal Service TM
CERTIFIED MAIL TM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

PORTLAND ME 04101

Postage	\$	\$0.49
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
013 6010 Total Postage & Fees INSP (2)	\$	\$6.49



7010 1870 0002 8136 7827

Sent To **OTTO PIZZA**
 Street, Apt. No., or PO Box No. **225 CONGRESS ST**
 City, State, ZIP+4 **PORTLAND ME 04101**

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:

**OTTO PIZZA
 225 CONGRESS ST
 PORTLAND ME 04101**

**RE: 013 G010
 INSP: 225 CONGRESS ST**

2. Article Number
(Transfer from service label)

7010 1870 0002 8136 7827

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) 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"/> Certified Mail [®]	<input type="checkbox"/> Priority Mail Express [™]
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 2013

Domestic Return Receipt