

CERTIFIED MAIL®



7014 1820 0001 4049 7154

SCANNED
01/23/17



Portland, Maine

Yes. Life's good here.

Permitting & Inspections Department
389 Congress Street, Room 315
Portland, Maine 04101-3509

*blc
12-30*

**RETURN RECEIPT
REQUESTED**

RM 1227 331



1000

04103

U.S. POSTAGE
PAID
PORTLAND, ME
04101
NOV 30, 17
AMOUNT
\$6.59
R2304N118173-11

SANTOS MARSHALL S
102 PLEASANT AVE
PORTLAND, ME 04103

NIXIE

015 DE 1

0012/25/17

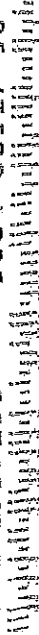
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

-- 9400921669362150

041033571
041013571

C BC: 04101357190

3084-08317-39-44



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</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>Marshall S. Santos 102 Pleasant Ave Portland, ME 04103</p>		<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent</p> <p><input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7014 1820 0001 4049 7154</p> <p>9590 9402 2591 6336 1628 00</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>017-600-2001</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Mail</p> <p><input type="checkbox"/> Mail Restricted Delivery (500)</p>		<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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

Domestic Return Receipt