

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

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

SAN ANTONIO TX 78240

CRITICAL USE

7010 1870 0002 8136 8121

Postage	\$	\$3.45	
Certified Fee		\$2.80	
Return Receipt Fee (Endorsement Required)		\$0.00	
Restricted Delivery Fee (Endorsement Required)		N/A	
		N/A	
017 E014 Total Postage & Fees	\$	\$6.74	

Sent To **40 WATERVILLE LLC**
 Street, Apt. No.;
 or PO Box No. **5518 PAINTER GREEN**
 City, State, ZIP+4 **SAN ANTONIO TX 78240**

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:

40 WATERVILLE LLC
5518 PAINTER GRLE!!
SAN ANTONIO TX 78240

RE: 017 E014
INSP: 40 WATERVILL ST PORTLAND ME

COMPLETE THIS SECTION ON DELIVERY

A. Signature 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® Priority Mail Express™

Registered Return Receipt for Merchandise

Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7010 1870 0002 8136 8121**