

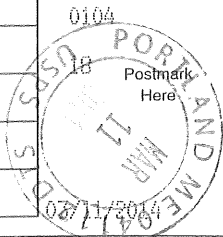
**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

PORTLAND ME 04101

**OFFICIAL USE**

Postage	\$ 00.49
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>



5527 2E2T 2000 060T 870L

Sent To **DAVID FERRAR**  
 Street, Apt. No., or PO Box No. **49 MAYO 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:  
  
**DAVID FERRAR**  
**49 MAYO STREET**  
**PORTLAND MAINE 04101**

**RE: 022 I010**

2. Article Number **7013 1090 0002 1737 6755**  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*X David Ferrar*  
 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