

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

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

OFFICIAL USE


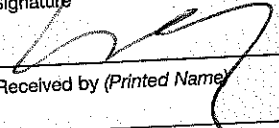
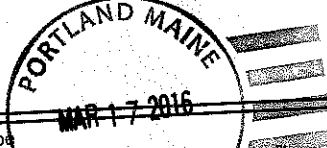
4456 9278 2000 0472 1870 0102

| | |
|--|--------|
| Postage | \$2.80 |
| Certified Fee | \$0.00 |
| Return Receipt Fee (Endorsement Required) | \$0.00 |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 |
| 022 L013 Total Postage & Fees | \$6.77 |

0104
 10
 Postmark Here
 03/14/2016

Sent To **DANIEL ROACH**
 Street, Apt. No., or PO Box No. **14 ANDERSON ST**
 City, State, ZIP+4 **PORTLAND ME 04101**

PS Form 3800, August 2006 See Reverse for Instructions

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|---|
| <p>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p>  <p>or on the front of special products</p> <p>1. Article Addressed to: DANIEL ROACH 14 ANDERSON ST PORTLAND ME 04101</p> <p>CBL: 022 L013 INSP: 14 ANDERSON ST</p> | <p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/>  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: center;">  </div> <p>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 checked="" type="checkbox"/> Restricted Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> |
| <p>2. Article Number (Transfer from service label)</p> | <p>7010 1870 0002 8136 9944</p> |
| <p>PS Form 3811, July 2013</p> | <p>Domestic Return Receipt</p> |