
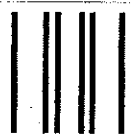


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: 85 Cumberland Avenue 405 West Yale Cir. Greenwood Springs, CO 81601	B. Received by (Printed Name) _____ C. Date of Delivery _____
2. Article Number (Transfer from service label) 7014 1820 0001 4047 1741	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, July 2015 PSN 7530-02-000-9053	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery

CBL# 026-4003001

USPS TRACKING#  9590 9402 3028 7124 4404 27	 <div style="border: 1px solid black; padding: 5px;"> First-Class Mail Postage & Fees Paid USPS Permit No. G-10 </div>
United States Postal Service	<div style="border: 1px solid black; padding: 10px;"> <p>• Sender: Please print your name, address, and ZIP+4® in this box•</p> <p style="text-align: center;">City of Portland Permitting and Inspections Department 389 Congress Street Portland, Maine 04101</p> <p style="text-align: right;">026-4003001</p> </div>
