

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

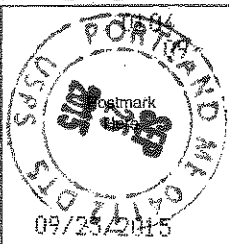
For delivery information visit our website at www.usps.com

5926 9219 2000 0191 0102

PORTLAND ME 04101

OFFICIAL USE

Postage	\$2.80
Certified Fee	\$0.00
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
029 B001 Total Postage & Fees	\$2.80
INSP	\$0.75



Sent To **THE CROOKED MILE CAFE**
 Street, Apt. No., or PO Box No. **8 MILK ST**
 City, State, ZIP+4 **PORTLAND ME 04101**

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Label 381113, June 2013

Scan barcode according to Retail System prompts

Place barcode on Sender's side of the form at the bottom of the section.

Return Receipt Transer Number

or on the front if space permits.

1. Article Addressed to:

THE CROOKED MILE CAFE
8 MILK STREET
PORTLAND ME 04101

RE: 029 B001
INSP: 8 MILK STREET

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

B. Received by (Printed Name) C. Date of Delivery

Stacie Perkins 9/28

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type

Certified Mail® Priority Mail Express™

Registered Return Receipt for Merchandise

Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

7010 1870 0002 8136 9265

PS Form 3811, July 2013

Domestic Return Receipt