

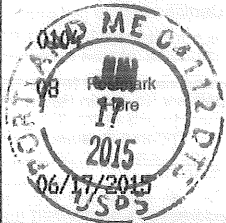
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

PORTLAND ME 04101 **OFFICIAL USE**

7008 0500 0001 4587 8904

Postage	\$	\$3.45
Certified Fee		\$2.80
Return Receipt Fee (Endorsement Required)		\$0.00
Restricted Delivery Fee (Endorsement Required)		N/A
		N/A
		\$0.49
032 H002 Total Postage & Fees	\$	\$6.74
INSP		



Sent To **TIMBER: C/O NOAH TALMATCH**
 Street, Apt. No., or PO Box No. **35 SILVER 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:
TIMBER
C/O NOAH TALMATCH
35 SILVER ST
PORTLAND ME 04101

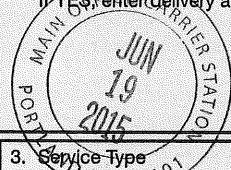
RE: 032 H002
INSP: 106 EXCHANGE ST

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) **M. J. ...** C. Date of Delivery **6-19-15**

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) **7008 0500 0001 4587 8904**