

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:

A Hlgvist, Owen
 266 Beech Ridge Rd
 Scarborough, ME
 04074
 33 D 20

2. Article Number

(Transfer from service la)

7007 0710 0002 4976 1269

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *B. Allgood* Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

8/14

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

7007 0710 0002 4976 1269

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

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

SCARBOROUGH, ME 04074

Postage	\$ 0.41	0104 08 Postmark Here
Certified Fee	\$2.65	
Return Receipt Fee (Endorsement Required)	\$2.15	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 5.21	08/13/2007 33 D 20

Sent To

Street, Apt. No.,
 or PO Box No.

City, State, ZIP+4

A Hlgvist Owen
266 Beech Ridge Rd
Scarborough, ME 04074

PS Form 3800, August 2006

See Reverse for Instructions