

7010 3090 0002 3273 8351

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
PORTLAND ME 04112	
OFFICIAL USE	
Postage	\$2.80
Certified Fee	\$0.00
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
034 F005 Total Postage & Fees	\$6.80
0104 02	
Sent To	
NEW SYSTEMS REALTY LLC	
Street, Apt. No., or PO Box No. PO Box 2	
City, State, ZIP+4 PORTLAND ME 04112	
PS Form 3800, August 2006 See Reverse for Instructions	

<p>SENDER: COMPLETE THIS SECTION</p> <ul style="list-style-type: none"> 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. <p>1. Article Addressed to:</p> <p>NEW SYSTEMS REALTY LLC PO BOX 2 PORTLAND ME 04112</p> <p>CBE: 034 F005 INSP: 78 PARRIS ST</p> <p>2. Article Number <i>(Transfer from service label)</i></p>	<p>COMPLETE THE RECIPIENT'S SECTION ON DELIVERY</p> <p>A. Signature X <i>Kempf</i> <input type="checkbox"/> Agent <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> <p>3. Service Type <input checked="" 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 type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7010 3090 0002 3273 8351</p> <p>Domestic Return Receipt</p> <p>PS Form 3811, July 2013</p>	