

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	\$ 0.44
Certified Fee	\$2.85
Return Receipt Fee (Endorsement Required)	\$2.30
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 5.59

0104

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7010 1870 0002 8136 5335

Sent To Steve Hilton
 Street, Apt. No.; or PO Box No. 19 Old Ironside
 City, State, ZIP+4 Scarborough, ME 04074

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:

Steve Hilton
19 Old Ironside Lane
Scarborough, ME 04074

044 A021

COMPLETE THIS SECTION ON DELIVERY

A. Signature Sabe low Agent
 Addressee

B. Received by (Printed Name) Hilton, S. C. Date of Delivery 12/8/11

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

[Handwritten Signature]

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

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