

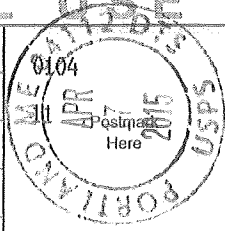
**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

7010 1870 0002 8136 7452

OFFICIAL USE  
PORTLAND ME 04112

Postage	\$ 0.49
Certified Fee	\$ 3.30
Return Receipt Fee (Endorsement Required)	\$ 2.70
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
<b>OWN BOV</b> Total Postage & Fees	\$ 6.49



04/17/2015

Sent To **RAJ & RAJ LLC**  
 Street, Apt. No., or PO Box No. **PO Box 17533**  
 City, State, ZIP+4 **PORTLAND ME 04112**

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:

**RAJ & RAJ LLC  
1 O BOX 17533  
PORTLAND ME 04112**

**RE: 044 B010  
INSP**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature   Agent  Addressee

B. Received by (Printed Name) **ABETE BOWMAN** C. Date of Delivery **4-22-15**

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

2. Article Number (Transfer from service label) **7010 1870 0002 8136 7452**