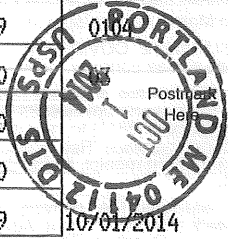


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Postage	\$ 0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$ 6.49</b>



7010 3090 0002 3273 7590

047 A015  
INSP

Sent To **PARKSIDE PROPERTIES**  
 Street, Apt. No.; or PO Box No. **PO BOX 10250**  
 City, State, ZIP+4 **PORTLAND ME 04104**

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:

**PARKSIDE PROPERTIES LLC  
PO BOX 10250  
PORTLAND ME 04104**

**RE: 047 A015  
INSP**

2. Article Number  
(Transfer from service label)

7010 3090 0002 3273 7590

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
 X

B. Received by (Printed Name) **A. Hutchinson** C. Date of Delivery **10/2/14**

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



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

4. Restricted Delivery? (Extra Fee)  Yes