

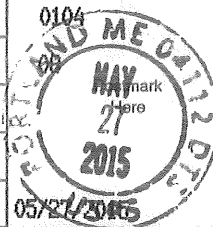
U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

PORTLAND ME 04104

OFFICIAL USE

Postage	\$	\$0.49
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
048 C002 Total Postage & Fees	\$	\$6.49



7933 8136 0002 1870 7010

Sent To **DONALD BLAISDELL**
 Street, Apt. No.; or PO Box No. **PO Box 1411**
 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:

**DONALD BLAISDELL
 PO BOX 1411
 PORTLAND ME 04104**

**RE: 048 C002
 INSP: 140 GRANT ST**

2. Article Number

(Transfer from service label)

7010 1870 0002 8136 7933

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Donald Blaisdell Agent Addressee

B. Received by (Printed Name)

Donald Blaisdell

C. Date of Delivery

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

3. Service Type

- Certified Mail[®] Priority Mail Express[™]
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

