

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

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

PORTLAND ME 04102



Postage	\$ 0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
048 F009 Total Postage & Fees	\$ 6.49

7012 0470 0002 1928 5594

Sent To
56 SHERMAN STREET LLC
 Street, Apt. No.;
 or PO Box No. **90 CARROLL ST**
 City, State, ZIP+4 **PORTLAND ME 04102**

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:

56 SHERMAN STREET LLC
90 CARROLL ST
PORTLAND ME 04102

RE: 048 F009
INSP

2. Article Number
(Transfer from service label)

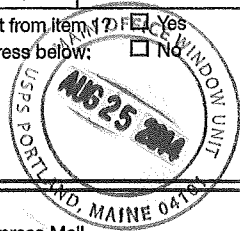
7012 0470 0002 1928 5594

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (*Printed Name*) **Mer Ped** C. Date of Delivery

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



3. Service Type

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

4. Restricted Delivery? (*Extra Fee*) Yes