

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

JIT Tejinder
68 Crestview Drive
South Portland, ME 04106



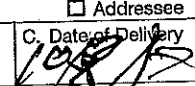
9590 9402 3028 7124 4572 65

2. Article Number (Transfer from service label)

7015 3010 0000 0201 1232

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

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

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


3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Mail Restricted Delivery (500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

CBL # 053-8013001

USPS TRACKING#



9590 9402 3028 7124 4572 65

United States Postal Service

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box•

City of Portland
Permitting and Inspections Department
389 Congress Street
Portland, Maine 04101

053-8013001

