

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:

Stacking Paper LLC
 110 Marginal Way, Ste 292
 Portland, ME 04101



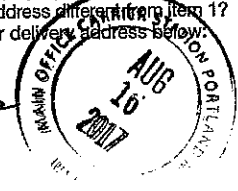
2. Article Number (Transfer from service label)
 7015 3010 0000 0201 0891

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Handwritten Signature] Agent Addressee

B. Received by (Printed Name) *RANCOUX* C. Date of Delivery *8-16-17*

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-C004001

USPS TRACKING#

9590 9402 3028 7124 4329 10

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

**United States
Postal Service**

• 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-C004001