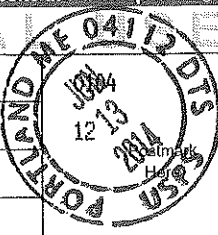


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

SOUTH PORTLAND ME 04106



1737 7141 2000 0901 E102

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

06/13/2014

Sent To: Godoka Lado
 Street, Apt. No., or PO Box No.: 560 Main St
 City, State, ZIP+4: South Portland ME 04106

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature
 X Anna Lameri Agent Addressee

B. Received by (Printed Name) ANNA LAMERI

C. Date of Delivery

1. Article Addressed to:

Godoka Lado
560 Main St.
S. Portland, ME
04106

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

PO BOX 3791
Portland ME 04104

E. Service Type

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

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7013 1090 0002 1737 7141