

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

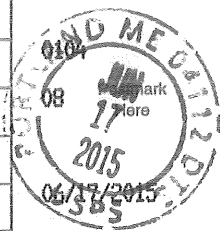
For delivery information visit our website at [www.usps.com](http://www.usps.com)®

WINDHAM ME 04062

**OFFICIAL USE**

7010 1870 0002 8136 8374

Postage	\$	\$3.45
Certified Fee		\$2.80
Return Receipt Fee (Endorsement Required)		\$0.00
		\$0.00
Restricted Delivery Fee (Endorsement Required)		N/A
		N/A
<b>064 D022</b> Total Postage & Fees	\$	\$0.49
<b>INSP</b>		\$6.74



Sent To **JAMES CUMMINGS**  
 Street, Apt. No.; or PO Box No. **PO Box 957**  
 City, State, ZIP+4 **WINDHAM ME 04062**

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:

**JAMES CUMMINGS  
 PO BOX 957  
 WINDHAM ME 04062**

**RE: 064 D022  
 INSP: 245 ST JOHN ST**

2. Article Number  
*(Transfer from service label)*

7010 1870 0002 8136 8374

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
 B. Received by (Printed Name) **JAMES CUMMINGS**  
 C. Date of Delivery **JUN 24 2015**  
 D. Is delivery address different from item 1?  Yes  
 No  
 If YES, enter delivery address below.

3. Service Type  
 Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes