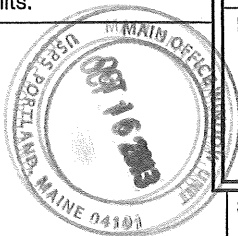


**SENDER: COMPLETE THIS SECTION**

- 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:

Black Barbara  
15 Cherry Street  
Portland, ME 04101

**065 A004001**

2. Article Number

*(Transfer from service label)*

7013 1090 0002 1737 6274

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Robert E. Kierstead* <sup>pa</sup>  Agent  
 Addressee

B. Received by (*Printed Name*)*Robert E. Kierstead*

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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