(Domestic Mail Only; No Insurance Coverage Provided) 꿉 For delivery information visit our website at www.usps.com PORTLAND ME 04102 П m \$0.45 0104 Postage 一 **E** \$2,95 Certified Fee 12 ru 1 Postmark A 1 Return Receipt Fee Here \$2.35 (Endorsement Required) Restricted Delivery Fee \$0.00 (Endorsement Required) \$5.75 Total Postage & Fees Sent To 7070 Street, Apt. No. or PO Box No. City, State, ZIP+4 **SENDER: COMPLETE THIS SECTION** COMPLETE THIS SECTION ON DELIVERY A. Signature ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. □ Agent X Print your name and address on the reverse □ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: MAHFUZ FULL 30 WOODFIELD RD PORTLAND ME 04102 3. Service Type ☐ Certified Mail ☐ Express Mail □ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 067 C003

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CERTIFIED MAIL RECEIPT

(Transfer from service label) PS Form 3811, February 2004

2. Article Number

Domestic Return Receipt

1870

7010

4. Restricted Delivery? (Extra Fee)

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102595-02-M-1540

☐ Yes