

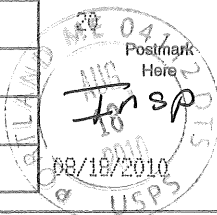
**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

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

PEAKS ISLAND ME 04108

**OFFICIAL USE**

Postage	\$ 10.44	0104
Certified Fee	\$2.80	
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$ 15.54</b>	



7009 0820 0001 4189 1631

084 I 008

Sent To Stimson Mary  
 Street, Apt. No.; or PO Box No. 79 Island Ave  
 City, State, ZIP+4 Peaks Island ME 04108

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:

**Stimson Mary**  
**79 Island Ave**  
**Portland, Maine 04108**

**084 I 008**

2. Article Number

*(Transfer from service label)*

7009 0820 0001 4189 1631

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Mitchell Stimson  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery 8-26-10

D. Is delivery address different from item 1?  Yes  
 If 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

