

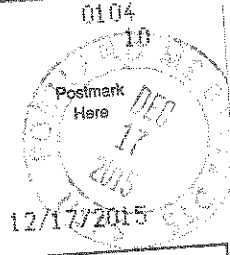
U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

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

PEAKS ISLAND, ME 04108  
**OFFICIAL USE**

7010 1870 0002 8136 9692

Postage	\$3.45
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>085 F011</b>	
Total Postage & Fees	\$6.74

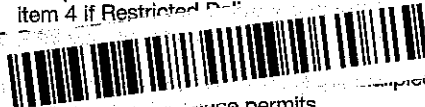


Sent To **LUCIE MORABITO**  
 Street, Apt. No. or PO Box No. **54 SEASHORE AVE**  
 City, State, ZIP+4 **PEAKS ISLAND ME 04108**

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.  
  
 in space permits.

1. Article Addressed to:  
**LUCIE MORABITO**  
**54 SEASHORE AVE**  
**PEAKS ISLAND MAINE 04108**

**CBL: 085 F011**  
**INSP: 54 SEASHORE AVE**

2. Article Number  
 (Transfer from service label) **7010 1870 0002 8136 9692**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*Lucie Morabito*  Addressee

B. Received by (Printed Name) **LUCIE MORABITO**

C. Date of Delivery **DEC 17 2015**

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

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

4. Restricted Delivery? (Extra Fee)  Yes