

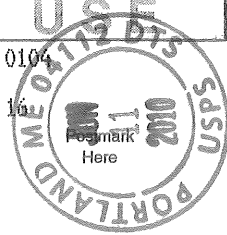
U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

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

PEAKS ISLAND ME 04108

7009 0820 0001 4189 1594

Postage	\$ 0.44
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>\$ 5.54</b>



Sent To *Paul & Heather Erico*

Street, Apt. No.;  
 or PO Box No. *58 Elizabeth St*

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:

*Paul & Heather Erico  
 58 Elizabeth St.  
 Peaks Island  
 ME 04108*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 *Paul Erico*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*6-14-10*

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

2. Article Number (Transfer from service label) 7009 0820 0001 4189 1594