

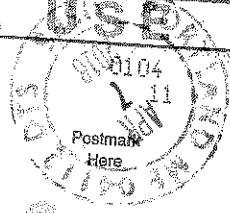
4522 9ETB 2000 029T DT02

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)

PORTLAND, ME 04101

Postage	\$2.20
Certified Fee	\$0.00
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>116 D028</b> Total Postage & Fees	\$
<b>INSPEC 25.74</b>	



04/07/2016

Sent To  
**THERESA KING**  
Street, Apt. No., or PO Box No. **102 BAXTER BLVD**  
City, State, ZIP+4 **PORTLAND ME 04101**

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 required.



1. Article Addressed to:  
**THERESA KING**  
**102 BAXTER BLVD**  
**PORTLAND ME 04101**

**CBL: 116 D028**  
**INSP: 25 FALMOUTH ST**

2. Article Number  
(Transfer from service label)

**7010 1870 0002 8136 7254**

PS Form 3811, July 2013

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
**X** *Theresa King*  Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1?  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

Domestic Return Receipt