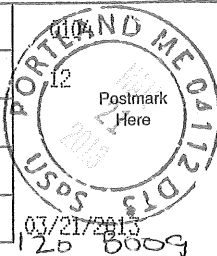


U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

PORTLAND ME 04102

Postage	\$	\$0.46
Certified Fee		\$3.10
Return Receipt Fee (Endorsement Required)		\$2.55
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.11



Sent To	
SIDNEY JACOBSON	
Street, Apt. No., or PO Box No. 102 EDWARDS ST.	
City, State, ZIP+4 PORTLAND ME 04102	
PS Form 3800, August 2006	
See Reverse for Instructions	

7010 3090 0002 3274 0149

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:

**SIDNEY JACOBSON
102 EDWARDS STREET
PORTLAND ME 04102**

RE: 120 B009

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

☐ Agent

☐ Addressee

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

☐ Express Mail

☐ Registered

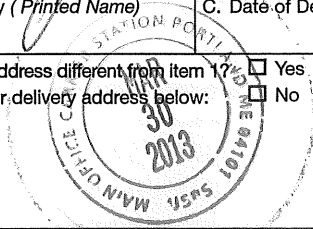
☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes



2. Article Number

(Transfer from service label)

7010 3090 0002 3274 0149