

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

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

PORTLAND ME 04102

Postage	\$	\$0.49
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.49



7042 7337 1737 0002 0990 1090 ETD

Sent To  
 120 0011001  
 Chris McMann  
 Street, Apt. No.;  
 or PO Box No. 111 Elizabeth Rd  
 City, State, ZIP+4  
 Portland, Maine 04102

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:

Chris McMann  
 111 Elizabeth Rd  
 Portland, ME 04102

2. Article Number  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
 X

B. Received by (Printed Name) C. Date of Delivery  
 Chris McMann 6/2/14

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

7013 1090 0002 1737 7042