

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

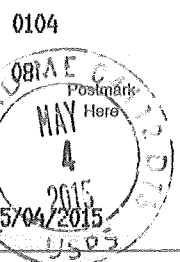
For delivery information visit our website at www.usps.com.

OFFICIAL USE

7698 8136 0002 1870 0000 9272 0000

PORTLAND ME 04103

Postage	\$ 0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
<i>124 G021</i> Total Postage & Fees	\$ 6.49



Sent To *Kathleen Hawkins*
 Street, Apt. No., or PO Box No. *190 Coyle St*
 City, State, ZIP+4 *Portland, ME 04103*

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:

KATHLEEN HAWKINS
190 COYLE ST
PORTLAND ME 04103

RE: 124 G021
INSP: 190 COYLE ST

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X Kate Hawkins

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

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

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

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7010 1870 0002 8136 7698**

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CERTIFIED MAIL™ RECEIPT
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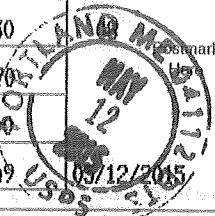
For delivery information visit our website at www.usps.com.

PORTLAND ME 04102

OFFICIAL USE

7728 8136 0002 1870

Postage	\$ 0.49	0104
Certified Fee	\$3.30	
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
186A F013 Total Postage & Fees	\$ 6.49	



Sent To: **PHU HUYNH**
 Street, Apt. No., or PO Box No. **182 MASS AVE**
 City, State, ZIP+4® **PORTLAND ME 04102**

PS Form 3800, August 2006 See Reverse for Instructions

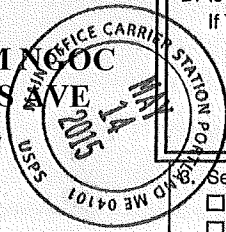
SENDER: COMPLETE THIS SECTION

- 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:

PHU HUYNH & PHAM NGOC
182 MASSACHUSETTS AVE
PORTLAND ME 04102

RE: 186A F013
INSP: 182 MASSACHUSETTS AVE



COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
 Addressee
X N G O C
- 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

Service Type

- Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

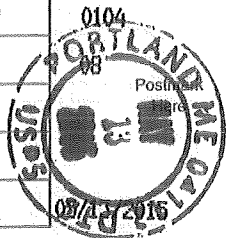
7728 8136 0002 1870

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

SCARBOROUGH ME 04074

Postage	\$ 00.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
014 F006 Total Postage & Fees	\$ 06.49



7803 8136 0002 1870 014 F006 INSP

Sent To **WILLIAM FRENCH**
 Street, Apt. No., or PO Box No. **PO Box 1382**
 City, State, ZIP+4 **SCARBOROUGH ME 04074**

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:

WILLIAM FRENCH
PO BOX 1382
SCARBOROUGH ME 04074

RE: 014 F006
INSP: 21 MERRILL ST

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Pamela French

B. Received by (Printed Name) Agent
 Addressee
Pamela French

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



2. Article Number (Transfer from service label) **7010 1870 0002 8136 7803**