

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

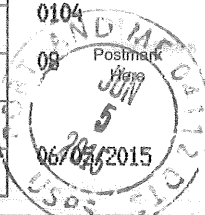
For delivery information visit our website at [www.usps.com](http://www.usps.com)®

CAPE ELIZABETH ME 04107

**OFFICIAL USE**

7010 1870 0002 8136 8107

Postage	\$ 3.45
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	N/A
	N/A
<b>125 E007</b> Total Postage & Fees	\$ 6.49
<b>INSP</b>	\$6.74



Sent To **HARRY KRIGMAN**  
 Street, Apt. No.;  
 or PO Box No. **24 WILDWOOD DR**  
 City, State, ZIP+4 **CAPE ELIZABETH ME 04107**

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:

**HARRY KRIGMAN**  
**24 WILDWOOD DR**  
**CAPE ELIZABETH ME 04107**

**RE: 125 E007**  
**INSP: 528 DEERING AVE**

2. Article Number

(Transfer from service label)

7010 1870 0002 8136 8107

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *John Zhou*

Agent

Addressee

B. Received by (Printed Name)

*JD 786*

C. Date of Delivery

*7/5/15*

D. Is delivery address different from item 1? If YES, enter delivery address below.

Yes

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

PS Form 3811, July 2013

Domestic Return Receipt