

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 04103

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



7013 1090 0002 1737 6298

Sent To Sharma Bina  
 Street, Apt. No., or PO Box No. 117 Brook Rd  
 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:  
  
 Sharma Bina  
 117 Brook Rd  
 Portland, ME 04103

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
X B. Sharma

B. Received by (Printed Name) C. Date of Delivery  
 Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No  
 OCT 17 2013  
 MAINE OFFICE WINDOW  
 U.S.S. PORTLAND, MAINE 04101

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) **7013 1090 0002 1737 6298**