

7012 0470 0002 1928 5747

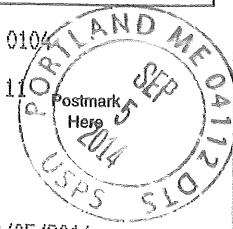
U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

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

FALMOUTH ME 04105

OFFICIAL USE

Postage	\$ 00.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>134 F013</b> Total Postage & Fees	\$ \$6.49



09/05/2014

Sent To Derice Andrew  
Street, Apt. No.,  
or PO Box No. 2 Flintlock Ln  
City, State, ZIP+4 Falmouth ME 04105

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:

**DERICE ANDREW R**  
**2 FLINTLOCK LN**  
**FALMOUTH ME 04105**

**RE: 134 F013**  
**INSP**

2. Article Number

(Transfer from service label)

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PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature X [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) K. Caray C. Date of Delivery 9-11-14

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