

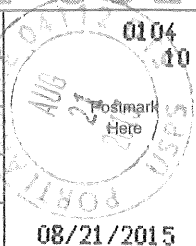
**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

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

PORTLAND, ME 04103

7010 1870 0002 8136 8992

Postage	\$3.45
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
137 A001 Total Postage & Fees	\$9.19
INSP	\$6.74



Sent To: DONALD FOSTER  
 Street, Apt. No., or PO Box No.: PO BOX 6617  
 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.



1. Article Addressed to:

**DONALD FOSTER**  
**PO BOX 6617**  
**PORTLAND ME 04103**

**RE: 137 A001**  
**INSP: 84 IRVING ST**

2. Article Number

(Transfer from service label)

7010 1870 0002 8136 8992

PS Form 3811, July 2013

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Donald W. Foster*

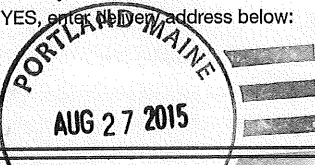
- Agent
- Addressee

B. Received by (Printed Name)

Donald W. Foster

C. Date of Delivery

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



3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes