## CERTIFIED MAIL RECEIPT EO (Domestic Mail Only; No Insurance Coverage Provided) CO n BRIDGTON THE 648095 ப m \$0.45 04 Postage Certified Fee \$2.95 П ostmark Return Receipt Fee Hère \$2.35 (Endorsement Required) Restricted Delivery Fee \$0.00 (Endorsement Required) \$5.75 Total Postage & Fees Sent To. 1001 Street, Apt. No., or PO Box No. City, State, ZIP+4 PS Form 3800, August 2000 See Reverse for Instructions COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete ☐ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by ( Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: □/No ι Ins POLTIONS Mark D Ricci PO Box 514 Bridgton, ME. 04009 Sepvice Type Certified Mail ☐ Express Mail

☐ Registered

☐ Insured Mail

4. Restricted Delivery? (Extra Fee)

8136 5878

U.S. Postal Service ™

021 E029

0002

1870

7010

☐ Yes

☐ Return Receipt for Merchandise

□ C.O.D.