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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.	A. Signature X. Date of Delivery B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery
1. Article Addressed to: JEAN CRAGIN 9 UNIVERSITY ST PORTLAND ME 04103	
RE: 151 C003 INSP: 9 UNIVERSITY ST	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7010	1870 0002 8136 7711
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