

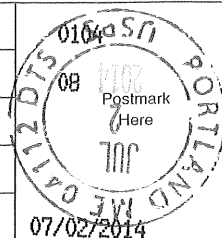
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

CAPE ELIZABETH ME 04107

7295 1737 0002 1090 0607 0103

Postage	\$	\$0.49
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.49



Sent to
 Shir' Sadr
 Street, Apt. No.,
 or PO Box No. 41 Ocean House Rd
 City, State, ZIP+4
 Cape Elizabeth, ME 04107

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:

Shir' Sadr
 41 Ocean House Rd
 Cape Elizabeth, ME 04107

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X [Signature]

B. Received by (Printed Name) C. Date of Delivery
 SD 286 7-3-14

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

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 7295