

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 3090 0002 3273 9747

Postage	\$ 0.46	0104 12 Postman Here MAY 24 2003 PORTLAND ME 04103 13
Certified Fee	\$3.10	
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.11	

Sent To Brian + Catherine Williams  
 Street, Apt. No.,  
 or PO Box No. 14 Anthony Ave  
 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.
- 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:

**BRIAN AND CATHERINE WILLIAMS**  
**14 ANTHONY AVENUE**  
**PORTLAND ME 04103**

**RE: 172 E001, 002, 003**

2. Article Number  
 (Transfer from service label)

7010 3090 0002 3273 9747

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee

B. Received by (Printed Name) P. Williams C. Date of Delivery 5/25/13

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