

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
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.	X/116-0C E	I Agent I Addressed e of Dellvery
PHU HUYNH & PHAM NO OC  182 MASSACHUSETTS AVE PORTLAND ME 04102	If YES, enter delivery address below:	] Yes ] No
RE: 186A F013 INSP: 182 MASSACHUSETTS AV	Registered Return Receipt for N	
2. Article Number (Transfer from service label) 7010 1870		1 103