

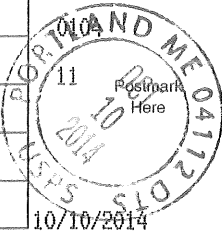
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

PORTLAND ME 04102

7668 3273 0002 2000 0900 0600 0102

Postage	\$	\$0.49
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
207 B006 INSP Total Postage & Fees	\$	\$6.49



Sent To Smith Nancy S
 Street, Apt. No.,
 or PO Box No. 1157 Westbrook St
 City, State, ZIP+4 Portland Me 04102

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:
SMITH NANCY S
1157 WESTBROOK ST
PORTLAND ME 04102

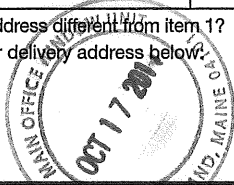
RE: 207 B006
INSP

COMPLETE THIS SECTION ON DELIVERY

A. Signature Paul D Smith Agent
 * PAUL D SMITH Addressee

B. Received by (Printed Name) C. Date of Delivery

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

2. Article Number (Transfer from service label) **7010 3090 0002 3273 7668**