

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

David P. Coventry
12 Bennett St
Portland, ME 04102



9590 9402 3028 7124 4402 74

2. Article Number (Transfer from service label)

7014 1820 0001 4047 1116

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

- ☐ Agent
- ☐ 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

- ☐ Adult Signature
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Collect on Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery (500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

CB # 284-6003001

USPS TRACKING®

50, MAINE

9590 9402 3028 7124 4402 74

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

City of Portland
Permitting and Inspections Department
389 Congress Street
Portland, Maine 04101

284-6003001