

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

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

YARMOUTH ME 04096

7010 1870 0002 8136 8015

Postage	\$ 3.45	0104 08 Postmark Here JUN 08/08/2015 2015
Certified Fee	\$2.00	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	N/A	
Total Postage & Fees	\$6.74	
Sent To JAMES BURGESS Street, Apt. No.; or PO Box No. 37 WEST CUSTOG PT City, State, ZIP+4 YARMOUTH ME 04096		

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:

JAMES BURGESS
37 WESTCUSTOG PT
YARMOUTH ME 04096

RE: 293 A007
INSP: 1190 FOREST AVE

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X 

B. Received by (Printed Name) C. Date of Delivery
 _____ **8/10**

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7010 1870 0002 8136 8015**