

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. 	A. Signature Agent Agent Addresses Addresses B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 17 Yes
1. Article Addressed to: RONALD & PRISCILLA GRAHA 313 WARREN AVENUE PORTLAND ME 04103	If YES, enter delivery address below:
296 A009	3. Service Type Certified Mail Registered Insured Mail C.O.D. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7010 =	0002 3274 0033