

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

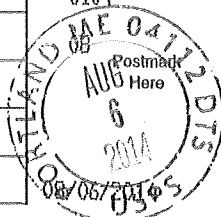
PORTLAND ME 04103

Postage \$ \$0.49

Certified Fee \$3.30

Return Receipt Fee
(Endorsement Required) \$2.70Restricted Delivery Fee
(Endorsement Required) \$0.00336 D017
Total Postage & Fees \$ \$6.49

0104



Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7012 0470 0002 1928 5495

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:

KATHY PEASLEY
118 NEWTON ST
PORTLAND ME 04103

RE: 336 D017**INSP**

2. Article Number

(Transfer from service label)

7012 0470 0002 1928 5495

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Rebecca Peasley*☐ 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

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540