

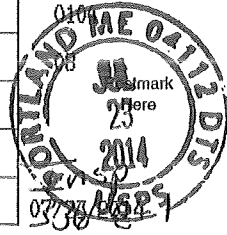
**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

4295 5624  
 9268 1928  
 0002 2000  
 0470 0002  
 7012 0470

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE  
 PORTLAND ME 04103

Postage	\$	\$0.49
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$</b>	<b>\$6.49</b>



**Sent To**  
 Leigh Cox  
 Street, Apt. No.,  
 or PO Box No. 32 Saugus St  
 City, State, ZIP+4 Portland, ME 04103  
 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:

**Leigh Ann Cox**  
**32 Saugus Street**  
**Portland, Maine 04103**

**336 E001 - Marge**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X Leigh Cox  
 Agent  
 Addressee

B. Received by (Printed Name)  
 04103

C. Date of Delivery  
 7-24-14

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)

7012 0470 0002 1928 5624