

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:

Derek Doucette
278 Allen Avenue
Portland, ME 04103

344 E002001

COMPLETE THIS SECTION FOR DELIVERY

A. Signature

X Agent Addressee

B. Received by (Printed Name)

D. Doucette

C. Date of Delivery

5/3/13

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 lab)

7010 3090 0002 3274 0323

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540