

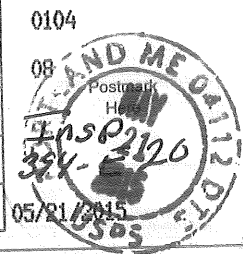
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

PORTLAND ME 04103

7865 7865 8136 0002 0002 1870 1870

| | |
|---|----------------|
| Postage | \$ 0.49 |
| Certified Fee | \$3.30 |
| Return Receipt Fee (Endorsement Required) | \$2.70 |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 |
| Total Postage & Fees | \$ 6.49 |



Sent To **O'Bryan Donna**
 Street, Apt. No., or PO Box No. **29 Juniper 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:

O'Bryan Donna
29 Juniper Street
Portland, ME 04103

394 E020001

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
**Donna O'Bryan*

B. Received by (Printed Name) *Donna O'Bryan* C. Date of Delivery *6/5/15*

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 7865**