

**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:

John Goodwin  
 1047 Ocean Avenue  
 Portland, Maine 04103

CBL 415B007/419A-A-00p

2. Article Number (Copy from service label)

7099340000195716 4470

PS Form 3811, July 1999

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

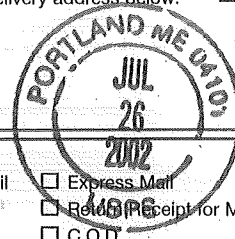
John Goodwin 7/25/02

C. Signature

X *J. Goodwin*  Agent  Addressee

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

102595-99-M-1789