

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 **OFFICIAL USE**

7005 1160 0000 4787 3386

Postage	\$ 0.41	0104
Certified Fee	\$2.65	02
Return Receipt Fee (Endorsement Required)	\$2.15	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 5.21	



03/06/2008
427-D028

Sent To
 Street, Apt. No.;
 or PO Box No. *Giglio Day Madalyn*
9 Columbia Terrace
 City, State, ZIP+4 *Port ME 04103*

PS Form 3800, June 2002 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:

Giglio-Day Madalyn
9 Columbia Ter
Portland, Maine 04103

427 D028

2. Article Number
 (Transfer from service label)

7005 1160 0000 4787 3386

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Madalyn Day Addressee

B. Received by (Printed Name) *MADALYN DAY* 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

