

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

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

PORTLAND ME 04103

7010 1870 0002 8136 8343

|   |         |
|---|---------|
| Postage   | \$ 3.45 |
| Certified Fee                                     | \$2.80  |
| Return Receipt Fee<br>(Endorsement Required)      | \$0.00  |
| Restricted Delivery Fee<br>(Endorsement Required) | N/A     |
| Total Postage & Fees                              | \$6.74  |



Sent to **JONATHAN PRESBY**  
 Street, Apt. No., or PO Box No. **124 YALE 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:

**JONATHAN PRESBY**  
**124 YALE ST**  
**PORTLAND ME 04103**

**RE: 438 A017**  
**INSP: 124 YALE ST**

2. Article Number

*(Transfer from service label)*

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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Handwritten Signature]*

- Agent  
 Addressee

B. Received by *(Printed Name)*

C. Date of Delivery

6/15/15

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

- Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? *(Extra Fee)*  Yes