

United States Postal Service
Application for Delivery of Mail Through Agent
 See Privacy Act Statement on Reverse

1. Date
 04/09/2018

In consideration of delivery of my or our (firm) mail to the agent named below, the addressee and agent agree: (1) the addressee or the agent must not file a change of address order with the Postal Service™ upon termination of the agency relationship; (2) the transfer of mail to another address is the responsibility of the addressee and the agent; (3) all mail delivered to the agency under this authorization must be prepaid with new postage when redeposited in the mails; (4) upon request the agent must provide to the Postal Service all addresses to which the agency transfers mail; and (5) when any information required on this form changes or becomes obsolete, the addressee(s) must file a revised application with the Commercial Mail Receiving Agency (CMRA).

NOTE: The applicant must execute this form in duplicate in the presence of the agent, his or her authorized employee, or a notary public. The agent provides the original completed signed PS Form 1583 to the Postal Service and retains a duplicate completed signed copy at the CMRA business location. The CMRA copy of PS Form PS 1583 must at all times be available for examination by the postmaster (or designee) and the Postal Inspection Service. The addressee and the agent agree to comply with all applicable Postal Service rules and regulations relative to delivery of mail through an agent. Failure to comply will subject the agency to withholding of mail from delivery until corrective action is taken. This application may be subject to verification procedures by the Postal Service to confirm that the applicant resides or conducts business at the home or business address listed in boxes 7 or 10, and that the identification listed in box 8 is valid.

Name in Which Applicant's Mail Will Be Received for Delivery to Agent. Complete a separate PS Form 1583 for EACH applicant. Spouses may complete and sign one PS Form 1583. Two items of valid identification apply to each spouse. Include dissimilar information for either spouse in appropriate box.)

Isislaine maxwell

3a. Address to be Used for Delivery (Include PMB or # sign.)

[Redacted]

3b. City Boston	3c. State MA	3d. Zip + 4 02114
--------------------	-----------------	----------------------

Applicant authorizes delivery to and in care of:

Name

UPS Store #5768

Address (No., street, apt./ste. no.)

[Redacted]

City Boston	d. State MA	e. Zip + 4 02114
----------------	----------------	---------------------

5. This authorization is extended to include restricted delivery mail for the undersigned(s):

Yes


Name of Applicant

Isislaine maxwell

7a. Applicant Home Address (No., street, apt./ste.)

[Redacted]

Two types of identification are required. One must contain a photograph of the addressee(s). Social Security cards, credit cards, and birth certificates are unacceptable as identification. The agent must write in identifying information. Subject to verification.

[Redacted]

7b. City boston	7c. State MA	7d. Zip + 4 02114
--------------------	-----------------	----------------------

7e. Applicant Telephone Number (Include area code)

[Redacted]

Name of Firm or Corporation

N/A

10a. Business Address (No., street, apt./ste. no.)

N/A

Acceptable identification includes: valid driver's license or state non-driver's identification card; armed forces, government, university, or recognized corporate identification card; passport, alien registration card or certificate of naturalization; current lease, mortgage or Deed of Trust; voter or vehicle registration card; or a home or vehicle insurance policy. A photocopy of identification may be retained by agent for verification.

10b. City N/A	10c. State N/A	10d. Zip + 4 N/A
------------------	-------------------	---------------------

10e. Business Telephone Number (Include area code)

N/A

11. Type of Business

N/A

If applicant is a firm, name each member whose mail is to be delivered. (All names listed must have verifiable identification. A guardian must list the names of minors receiving mail at their delivery address.)

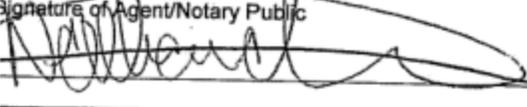
If a CORPORATION. Give Names and Addresses of Its Officers

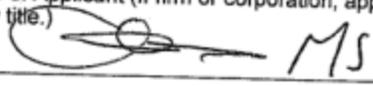
14. If business name (corporation or trade name) has been registered, give name of county and state, and date of registration.

N/A

N/A

Warning: The furnishing of false or misleading information on this form or omission of material information may result in criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties)

Signature of Agent/Notary Public


16. Signature of Applicant (If firm or corporation, application must be signed by officer. Show title.)
 MS

Mailbox Service Agreement

Customer Information

Center Number: 5768

Name: [REDACTED]		
Company:		
Address: [REDACTED]		
City: boston		State: MA
		ZIP: 02114
Business Telephone:	Home Telephone: [REDACTED]	
Fax:	Mobile Telephone: [REDACTED]	
E-mail Address: [REDACTED]	Text Messaging ID: [REDACTED]	

Mailbox Information

Mailbox Number: [REDACTED]	Mailbox Size: Small
----------------------------	---------------------

Terms and Conditions

1. This Mailbox Service Agreement ("Agreement") is made and entered into by the customer identified above ("Customer") for the use of and services related to a mailbox ("Mailbox") at The UPS Store® or Mail Boxes Etc.® Center identified above ("Center") under the terms set forth herein.
2. Customer agrees that Customer will not use the Center premises or any Center services for any unlawful, illegitimate, or fraudulent purpose, or for any purpose prohibited by U.S. postal regulations. Customer further agrees that any use of the Mailbox shall be in conformity with all applicable federal, state, and local laws. Each individual or entity must complete a separate United States Postal Service Form 1583 ("Form 1583") to be authorized to receive mail or packages at the Mailbox.
3. This Agreement and Form 1583 shall remain confidential, except that this Agreement and Form 1583, including Customer's name, address, and e-mail address, may be disclosed to the Center's franchisor, The UPS Store, Inc. or its successor, solely for purposes of communication between The UPS Store, Inc. and Customer related to Customer's use of the Mailbox, and upon written request of any law enforcement or other governmental agency, or when legally mandated. Upon request, Customer agrees to complete all necessary documents, including Form 1583 and any required acknowledgment form relating to service of process. Customer further agrees to sign a revised version of this Agreement and Form 1583 whenever any information required on this Agreement or Form 1583 changes.
4. Possession of the Mailbox key shall be considered valid evidence that the possessor is duly authorized to remove any contents from the Mailbox. In the event of death or incapacity of Customer, the Center will require the appropriate documents from the Probate Court, the executor of the estate, the trustee or other similar person or entity before releasing mail or packages to a requesting party.
5. Customer agrees to pay an initial set-up fee of \$30.00 (which includes a mailbox key fee and other fees associated with opening a mailbox) and/or a door key fee of \$0.00 (which includes an exterior door key fee and other fees associated with 24-hour access) as well as applicable monthly service fees and any applicable sales, use, or other taxes. Mailbox service fees are all due and payable in advance and Customer agrees that the Center may withhold mail and packages from Customer pending payment. There will be no pro-rations or refunds for cancellation of any service. Customer agrees to pay a late fee of \$30.00 if any payment is not received within five (5) days of when due. In the event the Mailbox lock is changed upon the request or fault of Customer, Customer agrees to pay a fee of \$10.00. Mailbox service fees and other related fees stated herein are subject to change.

In the event that Customer receives an unreasonable volume of mail or packages at the Mailbox according to the Center's reasonable judgment, the Center may require Customer to upgrade to a larger size Mailbox and pay any additional charge. The Center reserves the right to increase the Mailbox service fees in the event that Customer adds additional individuals or entities to the names of those individuals or entities authorized to receive mail and packages at the Mailbox pursuant to Form 1583.
6. Customer agrees that upon expiration, cancellation, or termination of this Agreement, Customer will not file a change of address order with the post office. Customer and the Center further agree that upon expiration, cancellation, or termination of this Agreement, Customer authorizes the Center to accept and destroy any "Unsolicited Mail" (e.g., mail addressed to "occupant," "current resident," or similar designation; or coupons, advertising, or other promotional material) and any mail addressed to Customer that is delivered to the Center by the United States Postal Service for six (6) months; and may refuse any package addressed to Customer delivered by any party other than the United States Postal Service, such as a commercial carrier service. However, at Customer's election, the Center will:
 - a. Re-mail (i.e., forward) Customer's mail (except for Unsolicited Mail) for six (6) months upon Customer's payment in advance for postage, packaging material, and forwarding fees. Customer must pay a monthly forwarding fee of \$5.00 for month 1, and \$5.00 for months 2 through 6 in advance for the time period that mail is to be re-mailed. It is Customer's responsibility to make arrangements with the Center to identify any mail forwarding needs prior to the expiration, cancellation, or termination of this Agreement; or
 - b. Store the mail or United States Postal Service packages (except for Unsolicited Mail) for up to six (6) months upon Customer's advance of a storage fee of \$30.00 per month for the time period in which the Center holds the mail or packages, plus a service fee of \$5.00 for each time Customer visits the Center to pick up such items. It is Customer's responsibility to make arrangements with the Center to identify any mail storage needs prior to the expiration, cancellation, or termination of this Agreement.
7. Six (6) months after the expiration, cancellation, or termination of this Agreement, the Center may:
 - a. Refuse any mail or package addressed to Customer and delivered to the Center.
 - b. Destroy any of Customer's mail or packages remaining at the Center at such time.
8. Customer authorizes the Center to complete and file a Shipper's Export Declaration as "agent" on behalf of Customer as "principal party in interest" when necessary and to act on behalf of Customer as Customer's true and lawful agent for purposes of any and all re-mailing, including

DRIVING LICENCE

UK

1. MAXWELL
2. MS GHISLAINE NOELLE M

26.11.2004

B.
B.



Marion Ghislaine Noëlle Maxwell
dju in ver.di, Germany

Signature

Validity: 15.09.2017

IFJ

PRESS



Receipt View

The UPS Store - #5768

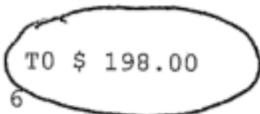


11/20/17 10:22 AM

We are the one stop for all your shipping, postal and business needs.

Hours of Operation: M-F 9:AM - 7:PM
Sat 10:AM - 5:PM Sun 12:PM - 4:PM

- 001 001045 (001) TO \$ 10.71
Ground Residential
Tracking# 1Z22E2480310982920
- 002 001045 (001) TO \$ 10.64
Ground Residential
Tracking# 1Z22E2480310985392
- 003 500248 (002) T1 \$ 8.98
#5 Bubble Mailer QTY 2
Reg Unit Price \$ 4.49
- 004 063001 (004) TO \$ 5.00
Key Fee NR
- 005 062101 (004) TO \$ 198.00
FS Personal Small NR QTY 6
Reg Unit Price \$ 33.00
Start Date 11/20/17 End Date 05/20/18
- 006 064001 (004) TO \$ 0.00
24 Hour Access NR QTY 1
Reg Unit Price \$ 0.00
Start Date 11/20/17 End Date 05/20/18
- 007 064002 (004) TO \$ 0.00
Call In Service NR QTY 1
Reg Unit Price \$ 0.00
Start Date 11/20/17 End Date 05/20/18
- 008 064004 (004) TO \$ 0.00
Pkg Notify - Email NR QTY 1
Reg Unit Price \$ 0.00
Start Date 11/20/17 End Date 05/20/18
- 009 063003 (004) TO \$ 25.00
Set Up Fee NR



Receipt View

SubTotal \$ 258.33
MA (T1) \$ 0.57
Total \$ 258.90

AMERICAN EXPRESS \$ 258.90

ACCOUNT NUMBER * *****7006

Appr Code: 831971 (I) Sale

ENTRY METHOD: ChipRead

MODE: Issuer

AID: A000000025010801

TVR: 0000008000

TSI: F800

AC: 7EAB3FA75FD8EE01

ARC: 00

Mailbox Services Transaction:

Mailbox # [REDACTED]

Customer g maxwell

Thank You g maxwell

Items Designated NR are NOT eligible
for Returns, Refunds or Exchanges.

Receipt ID 82741649203486882758 030 Items

CSH: nathan Tran: 1708 Reg: 002

TRACK YOUR SHIPMENT AT:
THEUPSSTORELOCAL.COM/5768

Whatever your business and personal
needs, we are here to serve you.

Time Sensitive Marketing Message Removed