

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

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

OFFICIAL

Postage \$ _____
 Certified Fee _____
 Return Receipt For (Endorsement Return) _____
 Restricted (Endorsement) _____

Bieu Tran & Andy H Chan et al
3755 38th Ave.
Oakland, CA 94619-2063

002515

PS Form 3800, August 2006 See Reverse for Instructions

7009 2820 0001 4359 5395

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Tran C. Date of Delivery 6/24</p> <p>Address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If delivery address below: <input checked="" type="checkbox"/> No</p>
<p>Bieu Tran & Andy H Chan et al 3755 38th Ave. Oakland, CA 94619-2063</p>	<p>3. Service type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7009 2820 0001 4359 5395</p>
PS Form 3811, July 2013	Domestic Return Receipt