

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 USE

7009 2820 0001 4372 7727

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

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BANK OF AMERICA
100 N. TRYON STREET
CHARLOTTE, N. CAROLINA 28202

PS Form 3811, August 2008 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:

BANK OF AMERICA
100 N. TRYON STREET
CHARLOTTE, N. CAROLINA 28202

2. Article Number
 (Transfer from service label)

7009 2820 0001 4372 7727

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Ospan Addressee

B. Received by (Printed Name) C. Date of Delivery
8/28

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