

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>BRADLEY A &amp; SANDRA L TRS</i></p> <p>C. Date of Delivery  <i>4/22/06</i></p>
<p><b>HIRST BRADLEY A &amp; SANDRA L TRS  &amp; HIRST BRADLEY ETAL  205 MAIN ST STE E  PLEASANTON, CA 94566-4500</b></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No  YES, enter delivery address below:</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 4372 7857</p>
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

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)

OFFICIAL USE

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

Postmark Here

HIRST BRADLEY A & SANDRA L TRS  
& HIRST BRADLEY ETAL  
205 MAIN ST STE E  
PLEASANTON, CA 94566-4500

PS Form 3800, August 2006 See Reverse for Instructions

7009 2820 0001 4372 7857

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