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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DEL	IVERY
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.	A. Signature A. Coods B. Received by (Printed Name) A. Noods	☐ Addressee C. Date of Delivery 10 - 23 - 14
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
Scott Atthowe	•	
Scott C. Atthowe Trust		A service of the service of
3924 Market St.		
Oakland, CA 94608		
000490	3. Service Type Certified Mail	ail eipt for Merchandise
2. Article Number 7009 282	0 0001 4359 6095	
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