

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>	A. Signature X <i>Robin Lee</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name) <i>Robin Lee</i>	C. Date of Delivery <i>1/25/18</i>
1. Article Addressed to	Address different from item 1? <input type="checkbox"/> Yes Delivery address below: <input type="checkbox"/> No	
<b>RICHARD PADOVANI AND WHITE FAMILY PROPERTIES LLC 845 92ND AVENUE OAKLAND, CA 94603</b>		
	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)	7014 2870 0001 3382 2828	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

**U.S. Postal Service™  
CERTIFIED MAIL® RE**  
Domestic Mail Only

For delivery information, visit [usps.com](#)

OFFICE

Postage \$ \_\_\_\_\_

Certified Fee \_\_\_\_\_

Return Receipt (Endorsement P) \_\_\_\_\_

Restricted Delivery (Endorsement) \_\_\_\_\_

Tr \_\_\_\_\_

Postmark Here **000320**

**RICHARD PADOVANI AND  
WHITE FAMILY PROPERTIES LLC  
845 92ND AVENUE  
OAKLAND, CA 94603**

City, State, ZIP+4® \_\_\_\_\_

PS Form 3800, July 2014 See Reverse for Instructions

7014 2870 0001 3382 2828