

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. 	A. Signature X <i>R. Padovani</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
	B. Received by (Printed Name)	C. Date of Delivery 1-25-18
RICHARD PADOVANI AND MARCIA CHAN, TRUSTEES, AND WHITE ET AL 4000 FOREST HILL AVENUE OAKLAND, CA 94602	Address different from item 1? <input type="checkbox"/> Yes delivery address below: <input type="checkbox"/> No	
	<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		
Article Number (Transfer from service label)	7014 2870 0001 3382 2842	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

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

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

OFFICIAL

Postage \$ _____

Certified Fee \$ _____

Return Receipt (Endorsement) _____

Restrictions (Endorsement) _____

RICHARD PADOVANI AND
 MARCIA CHAN, TRUSTEES,
 AND WHITE ET AL
 4000 FOREST HILL AVENUE
 OAKLAND, CA 94602

7014 2870 0001 3382 2842

000320

PS Form 3800, July 2014 See Reverse for Instructions