

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website

OFFICIAL

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

**FANTIN JENNY A TR & IANCO MAXIMILLIAN W
 ETAL
 673 39TH ST.
 RICHMOND, CA 94805-1805**

Street or PO _____
 City, State _____

PS Form 3800, August 2006 See Reverse for Instructions

7011 3500 0003 1935 1238

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Jenny A Fantin

B. Received by (Printed Name) _____ C. Date of Delivery *3/23/10*

Address different from item 1? Yes No
 delivery address below: _____

**FANTIN JENNY A TR & IANCO MAXIMILLIAN W
 ETAL
 673 39TH ST.
 RICHMOND, CA 94805-1805**

Service type:
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

203277

2. Article Number *203277*
 (Transfer from service label)

7011 3500 0003 1935 1238

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540