

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

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

OFFICE

Postage \$ _____

Certified Fee \$ _____

Return Receipt (Endorsement) For _____

Restricted Delivery (Endorsement) _____

To: _____

City, State, or ZIP+4® _____

Postmark Here **003278**

PS Form 3800, July 2014 See Reverse for Instructions

7014 2120 0000 5558 9955

4336 BROADWAY LLC
 C/O PAGE VAN LOBEN SELS
 4336 BROADWAY
 OAKLAND, CA 94611

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.

1. Article Addressed to:

4336 BROADWAY LLC
 C/O PAGE VAN LOBEN SELS
 4336 BROADWAY
 OAKLAND, CA 94611

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Gary Wells*

C. Date of Delivery *12/15/17*

D. Is delivery address different from item 1? Yes No
 If Yes, delivery address below: _____

- Registered
- Insured Mail
- Priority Mail Express™
- Return Receipt for Merchandise
- Collect on Delivery

2. Article Number

(Transfer from service label) **7014 2120 0000 5558 9955**

4. Restricted Delivery? (Extra Fee) Yes No