

**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 *Natasha Agardjian*  Agent  
 Addressee

B. Received by (Printed Name) *Natasha Agardjian* C. Date of Delivery *1/17/08*

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

Danny Liles, TR  
 230 W Laurel St., Apt. 801  
 San Diego, CA 92101

- Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
 (Transfer from service label)

7011 3500 0003 1935 1306

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service  
**CERTIFIED MAIL**  
 (Domestic Mail Only; No Postage Needed if Paid by Addressee)  
 For delivery information visit [usps.com](http://usps.com)

OFFICE USE

Postage \_\_\_\_\_  
 Certified \_\_\_\_\_  
 Return Rec' (Endorsement) \_\_\_\_\_  
 Restricted (Endorsement) \_\_\_\_\_  
 Total \_\_\_\_\_

Postmark Here

7011 3500 0003 1935 1306

Danny Liles, TR  
 230 W Laurel St., Apt. 801  
 San Diego, CA 92101

City, State, \_\_\_\_\_

PS Form 3800, August 2006 See Reverse for Instructions