

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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WEST PALM BEACH, FL 33409

0104
25

Postage	\$3.30
Certified Fee	\$2.70
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$6.47

Postmark Here
08/18/2016
053-C065601


Sent To
 Street, Apt. No., or P.O. Box No.
 City, State, ZIP+4
 Wilmington Savings Fund Society
 1661 Worthington Rd, Ste 100
 West Palm Beach FL 33409

See Reverse for Instructions

7010 1870 0002 8136 6493

OPTIONAL USE

PS Form 3800, August 2006

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete it if:</p> <p><input checked="" type="checkbox"/> F</p> <p><input checked="" type="checkbox"/> S</p> <p><input checked="" type="checkbox"/> A</p>  <p>or on the front if space permits.</p> <p>1. Article Addressed to: Wilmington Savings Fund Society 1661 Worthington Rd, Ste 100 West Palm Beach, Florida 33409</p> <p>2. Article Number (Transfer from service label) 7010 1870 0002 8136 6493</p>	<p>A. Signature <input checked="" type="checkbox"/> EARL HILL <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Print Name) AGENT</p> <p>C. Date of Delivery AUG 24 2016</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, July 2013 Domestic Return Receipt