

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired



1. Article Addressed to:

WELLS FARGO BANK NA  
3476 STATEVIEW BLVD  
FORT MILL SC 29715

RE: 181 B009  
INSP: 98 WESTMINSTER AVE

2. Article Number  
(Transfer from service label)

7010 1870 0002 6

PS Form 3811, July 2013

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *alopok...*

Agent  
 Addressee

B. Received by (Printed Name)

*ARISELLI*

C. Date of Delivery

*JAN 28 2015*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)  Yes

2015