

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>13-748 LH</i> <i>US Bank National Association</i> <i>10790 Rancho Bernardo Road</i> <i>SAN DIEGO, CA 92127-5705</i>		B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>7/15/17</i>	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7012 2210 0000 6252 8897	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)  
For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$ 46
Certified Fee	310
Return Receipt Fee (Endorsement Required)	255
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 611

**RECEIVED**  
JUL 16 2013  
Postmark Here

7012 2210 0000 6252 8897

Sent To: *US Bank National Association*  
Street, Apt. No., or PO Box No.: *10790 Rancho Bernardo Road*  
City, State, ZIP+4: *SAN DIEGO, CA 92127-5705*

PS Form 3806, August 2006    See Reverse for Instructions