

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:

Uchenna Samuel Ogbu-Nwobodo
Emaziem & Ogbu LLP
480 Poland way
suite 101
Oakland, CA 94621

2. Article Number

(Transfer from service)

7008 1300 0000 9802 7809

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Uchi Legor*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

102595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

09-80337 MISC vrw

• Sender: Please print your name, address, and ZIP+4 in this box •

CLERK U.S. DISTRICT COURT
450 GOLDEN GATE AVE., BOX 360
SAN FRANCISCO, CA 94102

RICHARD A. LEXING
CLERK U.S. DISTRICT COURT
SAN FRANCISCO, CALIFORNIA

DEC 28 PM 1:26

POST OFFICE

