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:

1-9-2013 Case #71580
Trustee Clark County Treasurer
c/o Gina Rice
4027 West 61st Street
Los Angeles, CA 90043-3604

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ 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

2. Article Number *(Transfer from service label)* 7011 2000 0001 1318 0841

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

2012 JAN -2 P 1:01

7011 2000 0001 1318 0841

CERTIFIED MAIL™

UNITED STATES POSTAGE PITNEY BOWES

02 1M $ 05.72⁴
0004279218 DEC 20 2012

MAILED FROM ZIPCODE 89101

1-9-2013 Case #71580
Trustee Clark County Treasurer
c/o Gina Rice
4027 West 61st Street
Los Angeles, CA 90043-3604

NIXIE 917 FE 1 00 12/28/12
RETURN TO SENDER
ATTEMPTED NOT KNOWN
UNABLE TO FORWARD
BC: 89101631895 *2808-05606-28-21

CITY of LAS VEGAS
OFFICE OF THE CITY CLERK
CITY HALL
495 S MAIN STREET
LAS VEGAS, NEVADA 89101