

**THIS IS A LEGAL NOTICE
NOTICE OF DEFAULT IN DISHONOR AND
CONFESSION OF JUDGMENT**

THIS IS A PRIVATE COMMUNICATION BETWEEN THE PARTIES

**NOTICE TO AGENT IS NOTICE TO PRINCIPAL
NOTICE TO PRINCIPAL IS NOTICE TO AGENT**

*Applicable to all successors and assigns
Silence is Acquiescence / Agreement / Dishonor*

Via Registered Mail #: **RE 206 941 943 US**
Via Facsimile: **888-855-9562**
Notice Date: **October 14, 2020**
Claimant(s): **Dollie McDonald**

Respondent(s):
*Hereinafter collectively
Referred to as "Respondent, you,
your offices, you and your client,
your agents or assigns"*

**Paul M. Donofrio, Chief Financial Officer
c/o BANK OF AMERICA as Successor in Interest
to COUNTRYWIDE HOME LOANS, INC. and
COUNTRYWIDE BANK, FSB, BAC HOME LOANS
SERVICING, LP FKA COUNTRYWIDE HOME LOANS
SERVICING, LP
Attn: Notice of Error & Request for Information
P.O. Box 942019
Simi Valley, CA 93094-2019**

Reference: **Alleged Debtor: DOLLIE MCDONALD
Invalidated Debt Type: MORTGAGE LOAN
Invalidated Debt Account:**

Greetings Mr. Donofrio,

This instrument is a **NOTICE OF DEFAULT IN DISHONOR AND CONFESSION OF JUDGMENT** ("Third and Final Official Notice") upon the following instruments presented in a private communiqué by Claimant to Respondent:



1. **NOTICE OF DEMAND FOR VALIDATION OF DEBT AND PROOF OF CLAIM (including "Error Resolution & Information Request" (ERIR) and "Qualified Written Request" (QWR)) dated August 11, 2020 ("Presentment" and/or "First Official Notice") and received and accepted by Respondent on August 17, 2020; and**
2. **NOTICE OF FAULT IN DISHONOR AND OPPORTUNITY TO CURE (including Confidential Settlement Agreement and General Release of All Claims and Notice of Revocation of Power of Attorney) dated September 30, 2020 ("Fault Notice" and/or "Second Official Notice") and received and accepted by Respondent on October 6, 2020.**

Respondent's failure to acknowledge aforementioned Presentment and Fault Notice is now taken as an Administrative Default pursuant to the Administrative Procedures Act of 1946 and a violation of Federal Law and you are liable for damages and costs to Claimant.

Allowing thirty (30) business days for the acceptance of **Notice of Demand** with an additional ten (10) calendar days from the notice date of Claimant's good faith opportunity to cure offer in its **Notice of Fault** and the time allowed having passed for acceptance, Claimant now deems the instruments to have been dishonored on **September 29, 2020** and **October 10, 2020**, respectively, thereby comprising a confession of judgment on the merits.

DEFAULT: Respondent's failure, refusal, or neglect to honor the offers places the Respondent in **DEFAULT**. Therefore, this matter is deemed res judicata and stare decisis.

For the course of dealing, set forth herein, with Respondent's failure, refusal, or neglect in the presentment of a verified response, as a sufficient verified response was defined, to the First Official Notice and the Second Official Notice, is your general acquiescence in this private matter, constitutes your tacit agreement and formal acceptance of all the terms and conditions and stipulations set forth within this **Notice of Default in Dishonor and Confession of Judgment, the Presentment, and the Fault Notice**, is your admission to the fact that all not provided information requested is not existent, constitutes your consent with Claimant's entry of this **Notice of Default in Dishonor** verifying Respondent's non-performance and acceptance of liability and is fully binding upon you in any court in America, without your protest or objection or that of those who represent you.

Furthermore, as Respondent's failure, refusal, or neglect to respond in the presentment of a verified response establishes the evidence as a matter of fact, the evidence will now be delivered to the Securities and Exchange Commission (SEC), the Federal Bureau of Investigation (FBI), the United States Secret Service and the Universal Postal Union (UPU) for investigation and prosecution of Securities Fraud, including, but not limited to, Counterfeiting and Fraud Conspiracy, and Mail and Wire Fraud, as well as select journalists who promote integrity, transparency and accountability, three (3) days from your receipt of this Third and Final Official Notice.

Of this presentment take due **NOTICE** and heed, and govern yourselves accordingly.

This **FINAL EXPRESSION IN A RECORD** is intended as a complete and exclusive statement of the terms and conditions and stipulations of the agreement between the parties.

I, **Dollie McDonald**, the undersigned, hereby and herein reserve the right, and am the only party with said right, to amend and or make amendments to this document as necessary, in order that the truth may be ascertained and its proceeding justly determined.

I, **Dollie McDonald**, do herewith declare and state and say that I, **Dollie McDonald**, issue this with sincere intent in truth, that I, **Dollie McDonald**, am competent by stating the matters set forth herein, that the contents are true, correct, complete, and certain, admissible as evidence, reasonable, not misleading, and by my best knowledge, by me, the undersigned.

IN WITNESS WHEREOF I hereunto set my hand and seal on this 14th day of October 2020 and hereby certify all the statements made above are true, correct and complete.

By: *Dollie McDonald*
Dollie McDonald, Real Party in Interest
All Rights Reserved Without Prejudice UCC 1-308



ENCLOSURE:

- Exhibit A - Copy of Registered Mail Receipts and Return Receipt Cards

Dollie McDonald

October 14, 2020

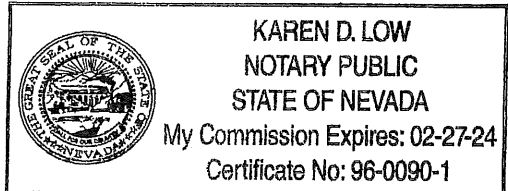
JURAT

STATE OF NEVADA)
)
COUNTY OF CLARK) ss.

Subscribed and sworn to (or affirmed) before me, Karen D. Low, Notary Public, on this 14th day of October 2020 by **Dollie McDonald**, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

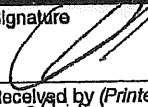


WITNESS my hand and official seal.
Karen D. Low
NOTARY PUBLIC

My Commission Expires: 2/27/24




COPY OF REGISTERED MAIL RECEIPTS AND RETURN RECEIPT CARDS

RE 206 941 926 US		Date Stamp
To Be Completed By Post Office	Postage \$ 7.75	Extra Services & Fees (continued)
	Extra Services & Fees	<input type="checkbox"/> Signature Confirmation \$
	<input type="checkbox"/> Registered Mail \$ 12.60	<input type="checkbox"/> Signature Confirmation Restricted Delivery \$
	<input type="checkbox"/> Return Receipt (hardcopy) \$ 2.85	Total Postage & Fees
	<input type="checkbox"/> Return Receipt (electronic) \$ 0.00	\$ 23.20
<input type="checkbox"/> Restricted Delivery \$ 0.00	Customer Must Declare Full Value \$ 0.00	Received by 08/11/2020
Domestic insurance up to \$50,000 is included based upon the declared value. International indemnity is limited. (See Reverse).		
OFFICIAL USE		
To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	FROM	DOTTIE NE DONALD
	TO	Paul M. Donofrio - Bank of America
		P.O. Box 942019
		Simi Valley, CA 93094-2019
	Attn: Notice of Error - Request For Info	
PS Form 3806, Registered Mail Receipt		Copy 1 - Customer
April 2015, PSN 7530-02-000-9051		(See Information on Reverse)
For domestic delivery information, visit our website at www.usps.com®		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X </p>																	
<p>1. Article Addressed to:</p> <p>Paul M. Donofrio - Bank of America P.O. Box 942019 Simi Valley, CA 93094-2019 Attn: Notice of Error</p>  <p>9590 9402 5436 9189 6056 28</p>	<p>B. Received by (Printed Name)</p> <p>D. Ne Donald</p>	<p>C. Date of Delivery</p> <p>9/17/2020</p>																
	<p>2. Article Number (Transfer from service label)</p> <p>RE 206 941 926 US</p>	<p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <div style="text-align: center;">  </div>																
	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																	
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																	
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																	
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise																	
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																	
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																	
<input type="checkbox"/> Insured Mail																		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																		
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt																

**COPY OF REGISTERED MAIL RECEIPTS AND
RETURN RECEIPT CARDS**

Registered No. RE206941930US		Date Stamp 0013 03	
To Be Completed By Post Office	Postage \$ \$7.75	Extra Services & Fees (continued)	
	Extra Services & Fees	<input type="checkbox"/> Signature Confirmation \$	
	<input type="checkbox"/> Registered Mail \$ \$12.60	<input type="checkbox"/> Signature Confirmation Restricted Delivery \$	
	<input type="checkbox"/> Return Receipt (hardcopy) \$ \$2.85	Total Postage & Fees	
	<input type="checkbox"/> Return Receipt (electronic) \$ \$0.00	\$ 423.20	
<input type="checkbox"/> Restricted Delivery \$ \$0.00	Customer Must Declare Full Value \$ \$0.00		Received by 10/01/2020
Domestic insurance up to \$50,000 is included based upon the declared value. International indemnity is limited. (See Reverse).			
OFFICIAL USE			
To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	FROM DOLLIE MCDONNID LAS VEGAS, NV 89134		
	TO Paul M. Donofrio, Chief Financial Officer, Bank of America Attn: Notice of Error & Request for Information P.O. Box 942019 Simi Valley, CA 93094-2019		
PS Form 3806, Registered Mail Receipt April 2015, PSN 7530-02-000-9051 For domestic delivery information, visit our website at www.usps.com®		Copy 1 - Customer (See Information on Reverse)	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete Items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery J. [Signature] 10/6</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Paul M. Donofrio, Chief Financial Officer c/o Bank of America Attn: Notice of Error & Request for Information P.O. Box 942019 Simi Valley, CA 93094-2019</p>	
<p>2. Article Number (Transfer from service label) RE 206 941 930 US</p>	
<p>3. Service Type</p> <ul style="list-style-type: none"> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) 	<ul style="list-style-type: none"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

Registered No.

RE206941943US

Date Stamp

0013
07

To Be Completed By Post Office	Postage \$	\$7.75	Extra Services & Fees (continued)
	Extra Services & Fees		<input type="checkbox"/> Signature Confirmation \$
	<input type="checkbox"/> Registered Mail \$	\$12.60	<input type="checkbox"/> Signature Confirmation Restricted Delivery \$
	<input type="checkbox"/> Return Receipt (hardcopy) \$	\$2.85	Total Postage & Fees
	<input type="checkbox"/> Return Receipt (electronic) \$	\$0.00	\$22.20
<input type="checkbox"/> Restricted Delivery \$	\$0.00		
Customer Must Declare Full Value \$	\$0.00	Received by	10/14/2020

Domestic Insurance up to \$50,000 is included based upon the declared value. International Indemnity is limited. (See Reverse).

OFFICIAL USE

To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	FROM	DONOFRIO, PAUL M. LAS VEGAS, NV 89134
	TO	Paul M. Donofrio, Chief Financial Officer, c/o Bank of America Attn: Notice of Error & Request for Information P.O. Box 942019 Simi Valley, CA 93094-2019

PS Form 3806, Registered Mail Receipt

Copy 1 - Customer

April 2015, PSN 7530-02-000-9051

(See Information on Reverse)

For domestic delivery information, visit our website at www.usps.com®

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Paul M. Donofrio, Chief Financial Officer
c/o Bank of America
Attn: Notice of Error & Request for Info
P.O. Box 942019
Simi Valley, CA 93094-2019



9590 9402 5436 9189 6055 81

2. Article Number (Transfer from service label)

RE 206 941 943 US

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] Agent
 Addressee

B. Received by (Printed Name)

Terrence B.

C. Date of Delivery

10-20

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



3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return