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MARYLAND OFFICE
 8401 CONNECTICUT AVENUE
 CHEVY CHASE, MARYLAND 20816

August 9, 1988

Sewa R. Joshi and
 Surinder Joshi
 6001 Poindexter Lane
 Rockville, MD 20852

Re: Chevy Chase Savings Bank, F.S.B.
 Loan No.: 5026067
 Mortgagor: Limerick, Wilmer I., et al.
 Property: Lot 3, Block C,
 "Section 4, Highview, 3664 Ridgeview
 Road, Ijamsville, MD

Dear Mr. and Mrs. Joshi:

Please be advised that this office represents Ronald L. Chasen, substitute trustee under a deed of trust from Wilmer I. Limerick and Ingrid H. Limerick securing a note to Chevy Chase Savings Bank, F.S.B. against the above-referenced property. The mortgagors are in default under the note, and we accordingly have been instructed to commence foreclosure proceedings against the property.

An examination of the title of the property shows that you are the holder of a note that is secured by a second trust against the property. In this regard, enclosed is a copy of the notice of foreclosure sale that has been sent to the mortgagor. You will note that the foreclosure sale is set for Thursday, September 8, 1988, at 11:30 a.m. in front of the Circuit Court for Frede

please do

DNP:lg

Enclosure

cc: Chevy
 Atter

<p>SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.</p>	
1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address.	2. <input type="checkbox"/> Restricted Delivery.
3. Article Addressed to: Sewa R. Joshi and Surinder Joshi 6001 Poindexter Lane Rockville, MD 20850	4. Article Number P-625 927 138 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail
5. Signature - Addressee X	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery	

PS Form 3811, Feb. 1986

DNP/limerick

DOMESTIC RETURN RECEIPT

CERTIFIED
 RETURN RECEIPT REQUESTED