

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by / Printed Name C. Date of Delivery</p> <p>Megan Poncelet 10-4-07</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: <input type="checkbox"/> No</p>
<p>1. Article Addressed to: <i>EVF-L OCT 01 2007</i></p> <p>Mr. Thomas Pardy, Registered Agent for TW Services, Inc. 106 S. Egan Avenue Madison, South Dakota 57042-2910</p>	<p><i>Certified</i> Express Mail Return Receipt for Merchandise I.O.D.</p> <p><input type="checkbox"/> Insured <input type="checkbox"/> Yes</p>
<p>2. Article (Retail) <i>I</i></p> <p>7005 1820 0005 4855 5212</p>	<p><i>TSCA-08-2007-0017</i></p>