

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:

OCT 28 2008
 David J. Larson
 Larson Law PC
 131 Main — POB 131
 Chamberlain, SD 57325

DOCKET NO.: CWA-08-2008-0033

RC

2. Article Number
 (Transfer from service label)

7007 3020 0003 3320 7234

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Mark Nesladek

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Mark Nesladek

C. Date of Delivery

10-31-08

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

Domestic Return Receipt

102595-02-M-1540