

U.S. Postal ServiceSM
CERTIFIED MAILSM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

Package \$ _____
Certified Fee _____

Recipient
Name David Meyer
Title President, COO
Return to
Name Senior Vice President, Inc.
Address Bomgaars Supply, Inc.
805 Zenith Drive
Total 1
City, State, ZIP+4[®] Sioux City, Iowa 51103

Send To _____
Street Apt. No.,
or PO Box No. _____
City, State, ZIP+4 _____

PS Form 3800 August 2004 See Reverse for Instructions

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OFFICIAL USE

Postage \$ _____
Certified Fee _____

Return to
Name Mr. Patterson
Title Attorney at Law
Address Bomgaars Supply, Inc.
25043 Little Water Lane
Total Post
City, State, ZIP+4[®] Custer, South Dakota 57730

Send To _____
Street Apt. No.,
or PO Box No. _____
City, State, ZIP+4 _____

PS Form 3800 August 2004 See Reverse for Instructions

7006 2760 0000 8651 7302

7006 2760 0000 8651 7319