

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:

**Ken Gould, Senior Counsel
Owens Corning Corporation
One Owens Corning Parkway
Toledo, OH 43659**

2. Article Number
(Transfer from service label)

7001 0320 0005 8918 7542

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
JUN 29 2007

C. Signature
X [Signature] Agent
 Addressee

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

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0005 8918 7542

CFR CLA-05-2007-0011

Postage	\$ 131
Certified Fee	265
Return Receipt Fee (Endorsement Required)	215
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 611

Postmark Here

Ser **Ken Gould, Senior Counsel**
Str **Owens Corning Corporation**
or **One Owens Corning Parkway**
Cit **Toledo, OH 43659**

PS for instructions