

U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

7008 3230 0003 0729 5353

Postage \$		5/13/2010 Postmark Date
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total \$	James R. Bullis and Kyle G. Pender Montgomery, Goff & Bullis P. O. Box 9199 Fargo, ND 58106-9199	
Sent To	DOCKET NO.: CWA-08-2009-0021	
Special Agent or PO De CAG Mail		

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:

James R. Bullis and Kyle G. Pender
 Montgomery, Goff & Bullis
 P. O. Box 9199
 Fargo, ND 58106-9199

DOCKET NO.: CWA-08-2009-0021

MAY 14 2010

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COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *Wynne Spauth*

B. Received by (Printed Name) Date of Delivery

Wynne Spauth *5/13/2010*

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below



3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Art (To) 7008 3230 0003 0729 5353

Order