- ■ 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:

CWA-07-2006-0249

Pat Day, President
Dial Highlands Quad Cities, LLC
11506 Nicholas Street, Suite 200
Omaha, Nebraska 68154

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X
☐ Agent
☐ Addressee

B. Received by (Printed Name)   C. Date of Delivery

HOWARD SPECK   12/8/06

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

2. Article Number
   (Transfer from service label)   7004 2510 0006 9719 8166

PS Form 3811, February 2004   Domestic Return Receipt   102595-02-M-1540