

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:
Nicholas Merengarten
500 IDS Center
80 S. Eighth St.
Minneapolis, MN
55402

2. Article Number
 (Transfer from service) *602E 295T 9000 02E0 700L*

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *S. Dawson* B. Date of Delivery *2/8/7*
 C. Signature *[Signature]* Agent Addressee
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

TSCA-AS-2007-0003

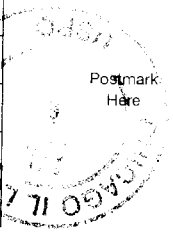
3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

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

Brooke E-13J

Postage	\$ <i>111</i>
Certified Fee	<i>290</i>
Return Receipt Fee (Endorsement Required)	<i>185</i>
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ <i>536</i>



Sent To *Nick Merengarten*
 Street, Apt. No., or PO Box No. *80 S. Eighth St.*
 City, State, ZIP+4 *Minneapolis, MN 55402*

7001 0320 0006 1562 3709