

7006 2760 0000 8652 1699

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

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement)	

Mr. Joseph W. Younker
Bradley & Riley PC
One South Gilbert Street
Iowa City, Iowa 52240-3914

Sent To: One South Gilbert Street
Iowa City, Iowa 52240-3914

PS Form 3800, August 2006 See Reverse for Instructions

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: *Rainbow CERCLA-07-2008-0005*

Mr. Joseph W. Younker
Bradley & Riley PC
One South Gilbert Street
Iowa City, Iowa 52240-3914

2. Article (Transfer) Number: **7006 2760 0000 8652 1699**

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *C. Keller* C. Date of Delivery: *6/30/08*

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

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

7006 2760 0000 8652 1705

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CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restr. (Endo)	

Mr. Steven Pace
Shuttleworth & Ingersoll, P.L.C.
P.O. Box 2107
Cedar Rapids, Iowa 52401-2106

Sent To: Cedar Rapids, Iowa 52401-2106

PS Form 3800, August 2006 See Reverse for Instructions

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: *Rainbow CERCLA-07-2008-0005*

Mr. Steven Pace
Shuttleworth & Ingersoll, P.L.C.
P.O. Box 2107
Cedar Rapids, Iowa 52401-2106

2. Article Number (Transfer from serv): **7006 2760 0000 8652 1705**

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *Steven Pace* C. Date of Delivery: *6-30-08*

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

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

