

EXHIBIT 7

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:

Arnold Steinman
 c/o Ross Transport Co.
 4220 Almond St.
 Phila., PA 19137

2. Article Number

(Transfer from service label) 7001 1140 0001 1044 0828

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Clarence Craig*

- Agent
 Addressee

B. Received by (Printed Name)

Clarence Craig

C. Date of Delivery

7/22/13

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

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:

Ross Transport Co
 4220 Almond St
 Phila., PA 19137

2. Article Number

(Transfer from service label) 7001 1140 0001 1044 0811

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Clarence Craig*

- Agent
 Addressee

B. Received by (Printed Name)

Clarence Craig

C. Date of Delivery

7/22/13

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