

**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:

Mr. Christopher Jones  
 Calfee, Halter & Griswold LLP  
 110 Fifth Third Center  
 21 East State Street  
 Columbus, Ohio 43215-4243

2. Article Number  
 (Transfer from service) 7001 0320 0005 8910 5225

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) \_\_\_\_\_ B. Date of Delivery 6/4

C. Signature  
 Stacy [Signature]  Agent  
 Addressee

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

**EPCRA-05-2007-0024**

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**  
 (Delivered to addressee)

Sonja-Brooks-Woodard E-13J

**EPCRA-05-2007-0024**

Postage	\$ 1.31	Postmark Here
Certified Fee	2.65	
Return Receipt Fee (Endorsement Required)	2.15	
Restricted Delivery Fee (Endorsement Required)		
<b>Total Postage &amp; Fees</b>	<b>\$ 6.11</b>	

Sent To: Mr. Christopher Jones  
 Calfee, Halter & Griswold LLP  
 Street, Apt. No., or PO Box No.: 110 Fifth Third Center  
 City, State, ZIP+4: 21 East State Street  
 Columbus, Ohio 43215-4243

PS Form 3800, January 2001 See Reverse for Instructions

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