

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

7008 3230 0003 0729 5346

Postage \$	
Certified Fee	
Return Receipt Fee (Enclosure Required)	
Postmark Here	5/13/2010
From/Address	Lawrence Matteson, President L. W. Matteson, Inc. P. O. Box 667 Burlington, Iowa 52601
To	
Item	DOCKET NO.: CWA-08-2010-0014
City, State, ZIP+4	

PS Form 3811, August 2009

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:

Lawrence Matteson, President
 L. W. Matteson, Inc.
 P. O. Box 667
 Burlington, Iowa 52601

DOCKET NO.: CWA-08-2010-0014

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

Lawrence Matteson

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- Certified Mail
- Registered Mail
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- G.O.D.

4. Restricted Delivery? (Extra Fee) Yes

MAY 11 2010

2. Article (Post) 7008 3230 0003 0729 5346

CATED