

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:

Paul R. DeRensis, BBO # 12100
 Daniel R. Deutsch BBO # 551744
 Deutsch, Williams, Brooks, Derensis & Holland, P.C.
 One Design Center Place
 Suite 600
 Boston, MA 02210
 Docket No. CWA-01-2009-0070

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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



3. Service Type *PS 42*
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7008 1140 0002 9708 1329

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540