

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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.

A. Received by (Please Print Clearly) **P Thompson** B. Date of Delivery **11/8/06**  
 C. Signature *P Thompson*  Agent  Addressee  
 X

1. Article Addressed to:  
  
 Gary F. Franke Co., L.P.A.  
 120 East Fourth Street  
 Suite 1040  
 Cincinnati, Ohio 45202

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:  
  
**FIFRA-05-2007-0004**  
 3. Service Type  
 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) **7001 0320 0005 8932 9102**

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
 (Delivered to Sonja Brooks-Woodard E-13J)  
**FIFRA-05-2007-0004**

Postage	\$ 1.11
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 5.36</b>

Postmark Here **CHICAGO, IL LOOP STA. 2006 USPS**

Sent To: Gary F. Franke Co., L.P.A.  
 120 East Fourth Street  
 Suite 1040  
 Cincinnati, Ohio 45202

PS Form 3800, January 2001 See Reverse for Instructions

7001 0320 0005 8932 9102