

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:
 Michael D. Graves, Esq.
 Hall and Estill
 320 S. Boston Avenue
 Suite 400
 Tulsa, OK 74103-3708

2. Article Number
 (Transfer from service label) 7001 0320 0005 8919 1853

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery 9/4/7

C. Signature *[Handwritten Signature]*
 Agent
 Addressee

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
 Restricted Delivery? (Extra Fee) Yes

RECEIVED
 REGIONAL MERCHANDISE
 CLERK
 SEP 10 11 39 AM '07