

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

7008 3230 0003 0729 6138

Postage	\$	1/18/2011 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Steven D. Sandven, Esq.  
 Steven D. Sandven Law Offices  
 Three Hundred Building, Suite 106  
 300 North Dakota Avenue  
 Sioux Falls, SD 57104  
 DOCKET NO.: FIFRA-08-2010-0017

Sent To  
 Street,  
 or PO E  
 City, St

PS Form 3800, August 2006

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.

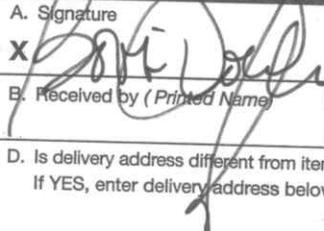
1. Article Addressed to:

Steven D. Sandven, Esq.  
 Steven D. Sandven Law Offices  
 Three Hundred Building, Suite 106  
 300 North Dakota Avenue  
 Sioux Falls, SD 57104  
 DOCKET NO.: FIFRA-08-2010-0017

JAN 18 2011

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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
  
 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  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
 (Transfer from sender)

7008 3230 0003 0729 6138

CA 170

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540