

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.

Article Addressed to
 Neil Dept of Roads
 Hawkins

Jennifer A. Huxoll
 Attorney General's Office - Roads
 Section
 1500 Highway 2, P.O. Box 94759
 Lincoln, NE 68509-4759

2. Article Numt 7004 2510 0006 9720 7066
 (Transfer from)

PS Form 3811, February 2004

Domestic Return Receipt

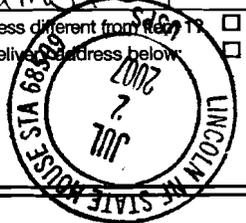
102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature V. Samstev Agent
 Addressee

B. Received by (Printed Name) V. Samstev 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

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Article Addressed to
 Neil Dept of Roads
 Hawkins

Tom Wilmoth
 Attorney at Law
 206 South 13th Street, Suite 1400
 Lincoln, NE 68508

2. Article Number 7004 2510 0006 9720 9541
 (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Jackey Howell Agent
 Addressee

B. Received by (Printed Name) Andrea Howell C. Date of Delivery 7/2

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