

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:

Colin G. Van Dyke
MINTZ LEVIN
One Financial Center
Boston, MA 02111
Docket No. CAA-01-2011-0127

2. Article Number
(Transfer from service label)

7010 1670 0000 2319 2856

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Handwritten Signature]* Agent Addressee

B. Received by (*Printed Name*): *Natanson, ID* C. Date of Delivery: *10-31-11*

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