

**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.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

**Randy Earp**  
**One Hour Fireweed Cleaners**  
**Anchorage, AK 99503**

12 JAN 21 2005  
 HEARINGS CLERK  
 REGION 10

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) 7011 1150 0000 7954 0410