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**Brian E. Wall**  
 Counsel Environmental Practice Group  
 Chevron U.S.A., Inc.  
 6001 Bollinger Canyon Road, T-3256  
 San Ramon, CA 94583

*Sent To*  
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 City, State, ZIP

PS Form 3800, June 2002 See Reverse for Instructions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p> <p style="margin-left: 40px;"><b>Brian E. Wall</b>            Counsel Environmental Practice Group            Chevron U.S.A., Inc.            6001 Bollinger Canyon Road, T-3256            San Ramon, CA 94583</p>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Brian E. Wall</i> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <i>R. Miranda</i> <span style="float: right;">SEP - 5 2007</span></p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; margin-left: 40px;">P O BOX 6001            SAN RAMON CA 94583-0607</p>
<p>2. Article (Transit) <span style="float: right;">7005 1820 0005 4855 9630</span></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

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