

**U.S. Postal Service**  
**CERTIFIED MAIL™ RECEIPT**  
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7005 1820 0005 4855 7643

*Order of Protection*

Postage	\$	11/13/07 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
<b>Total Postage</b>	<b>Douglas W. Wolf</b>	
Item To	Sotlosky, Chambers, Sachse, Endreson & Perry, LLP, 1425 K Street, NW - Suite 600 Washington, DC 20005	
Street, Apt, PO, or PO Box No.	<b>DOCKET NO.: SDWA-08-2007-0082</b>	
City, State, ZIP+4		

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>A. Signature <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>M. Sach</i> C. Date of Delivery <i>11-13-07</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:  <b>NOV 14 2007</b> <i>D</i></p> <p><b>Douglas W. Wolf</b>          Sotlosky, Chambers, Sachse,          Endreson &amp; Perry, LLP,          1425 K Street, NW - Suite 600          Washington, DC 20005  <b>DOCKET NO.: SDWA-08-2007-0082</b></p>	<p>3. Service Type  <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>
<p>2. Article # (Number) <b>7005 1820 0005 4855 7643</b></p>	<p><i>RC</i></p> <p><i>2nd. Extension</i>  <i>Return Order</i></p>