

**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. Received by (Please Print Clearly) <i>Lisa Eachus</i>	B. Date of Delivery <i>7/10/08</i>
C. Signature <b>X</b> <i>Lisa Eachus</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes YES, enter delivery address below: <input type="checkbox"/> No	

**Maria S. Angelo**  
Counsel

DuPont Legal, Environmental Group  
1007 Market Street, Room D-7086  
Wilmington, DE 19898

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.

*RCRA-05-2008-0010 25.*

4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes
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2. Article Number (Transfer from service label)	7001 0320 0006 1454 0199
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PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424