

MHW

| COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|---|--|
| <ul style="list-style-type: none"> 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. | <p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) DEYMAN ALEXANDER</p> <p>C. Date of Delivery 2-28-08</p> |
| <p>1. Article Addressed to: 08CR133</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>Mr. Norbert G. Jaworski, Clerk United States District Court 104 Melvin Price Federal Building and United States Courthouse 750 Missouri Avenue East St. Louis, IL 62201</p> </div> | <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>3. Service Type <input 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 (Transfer from service label)</p> | <p>7006 0100 0001 7313 6430</p> |
| <p>PS Form 3811, February 2004 Domestic Return Receipt 108895-02-44-1540</p> | |

FILED
 3-4-2008
 MAR 4 2008 YM

MICHAEL W. DOBBINS
 CLERK, U.S. DISTRICT COURT