7009 1410 0000 8960 3673

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at www.usps.com®

OFFICIAL USE

| | |
|---|---|
| Postage | $ |
| Certified Fee | |
| Return Receipt Fee (Endorsement Required) | |
| Restricted Delivery Fee (Endorsement Re | |
| Total Postage | |

Postmark Here

Kevin M. Phillips
20719-C3-30
NRJ&CF
RD2, Box 1
Moundsville, WV 26041
5:11cv46 36 & 37

*Sent To*

*Street, Apt. No.; or PO Box No.*

*City, State, ZIP+4*

PS Form 3800, August 2006

See Reverse for Instructions