

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

4172 4595 0000 0494 0702

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

1:10-CV-173
 DOC. 18 8/23/11

Sent To	MICHAEL BROGAN
Street, Apt. No., or PO Box No.	1275 SARVIS ROAD
City, State, ZIP+4	MT. OLIVET, KY 41064

PS Form 3800, August 2006

See Reverse for Instructions