

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF ARKANSAS
FAYETTEVILLE DIVISION

SANDRA L. GRAY individually and)
NICK JACKSON and DEENA JACKSON)
As husband and wife and)
All others Persons Similarly Situated,)

Case No. 07-5065

Plaintiffs)

v.)

MENU FOODS; MENU FOODS)
INCOME FUND; MENU FOODS)
GEN PAR LIMITED; MENU FOODS)
LIMITED PARTNERSHIP; MENU)
FOODS OPERATING PARTNERSHIP;)
MENU FOODS MIDWEST CORP;)
MENU FOODS SOUTH DAKOTA;)
MENU FOODS, INC.; MENU FOODS)
HOLDINGS, INC.; WAL-MART)
STORES, INC.; XUZHOU ANYING)
BIOLOGIC TECHNOLOGY)
DEVELOPMENT CO. LTD)

Defendants

STATEMENT WITH RESPECT TO SERVICE

Comes now the undersigned attorney and for his Affidavit states:

That on or about the 17th day of April, 2007, the undersigned sent by certified mail a copy of a Summons and Complaint to Menu Foods, Inc., defendant herein. The Domestic Return Receipt card was signed by the defendant or an agent thereof on April 23, 2007, and is attached hereto confirming service upon the Defendant.



Bill G. Horton

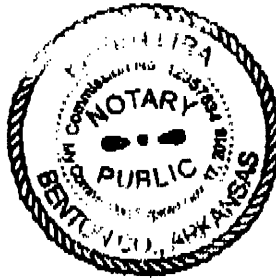
STATE OF ARKANSAS)
) SS.
 COUNTY OF BENTON)

Subscribed and sworn to before me, the undersigned Notary Public, within and for the County and State aforesaid on this 4th day of May, 2007.

Karen Lucia

 Notary Public

My Commission Expires: 11/17/16



SENDER: 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 checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>Menu Foods Inc Corp. Trust Co. 820 Bear Tavern Rd West Trenton NJ 08628 08628</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RESTRICTED DELIVERY</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" 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 checked="" type="checkbox"/> Yes</p>
<p>7005 1820 0005 9760 8327</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	