

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

7117 989 0000 05TE 2007

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

Postmark  
Here

1:08-CV-011  
 DOC. 33  
 12/10/09

Sent To **BRIAN TIMMS 209-153**  
 Street, Apt. No.,  
 or PO Box No. **LECI, P.O. BOX 56**  
 City, State, ZIP+4 **LEBANON, OH 45036**

PS Form 3800, June 2002

See Reverse for Instructions