

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to: 8/19/10 B.M.  
PCB 2010-071  
Joseph Asselta  
Agovino & Asselta, LLP  
170 Old Country Road  
Suite 608  
Mineola, NY 11501

2. Article Number  
(Transfer from service label)

7009 0960 0000 5942 3273

PS Form 3811, February 2004

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *J. Scholl*

- Agent
- Addressee

B. Received by (Printed Name)

*J. Scholl*

Date of Delivery  
*Aug 26 2010*

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

102595-02-M-1540