

	TC-04-420 2-23-04
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X A Agent  A Agent  A Control of Delivery  D. Is delivery address different from ten gradual Yes
Article Addressed to:	If YES, enter delivery addit as below:
Legal Department LD Exchange.Com, Inc. 2510 North Redhill Ave., Suite 230 Santa Ana, CA 92705	3. Service Type Certified Mail
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7001 1940	0002 6942 5846
PS Form 3811, August 2001 Domestic Re	eturn Receipt 102595-02-M-1540