

EXHIBIT "A"

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● **SENDER:** Complete Items 1 and 2 when additional services are desired, and complete Items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge)!		2. <input type="checkbox"/> Restricted Delivery (Extra charge)!	
3. Article Addressed to: Jim Barnett Contracting 1219 Thomas Avenue Charlotte, NC 28205		4. Article Number P 802-468-363	
		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	
Always obtain signature of addressee or agent and DATE DELIVERED.			
5. Signature - Addressee x <i>Jim Barnett</i>		8. Addressee's Address (ONLY if requested and fee paid)	
6. Signature - Agent X			
7. Date of Delivery 10-2			

PS Form 3811, Mar. 1987 * U.S.G.P.O. 1987-178-264 DOMESTIC RETURN RECEIPT

Recorded October 6, 1989 at 3:31 P.M.

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