

**Hamre, John G.**

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**From:** paygovadmin@mail.doc.twai.gov  
**Sent:** Thursday, March 03, 2011 3:28 PM  
**To:** Hamre, John G.  
**Subject:** Pay.Gov Payment Confirmation

THIS IS AN AUTOMATED MESSAGE. PLEASE DO NOT REPLY.

Your transaction has been successfully completed.

Transaction Summary

Application Name: Delaware CM ECF  
Pay.gov Tracking ID: 25206VMF  
Agency Tracking ID: 5130801  
Transaction Type: Sale  
Transaction Date: Mar 3, 2011 4:28:26 PM

Account Holder Name: Charlene A. Magstadt Transaction Amount: \$150.00 Billing Address: 600 E. Boulevard, Ave.  
Billing Address 2: Dept. 408  
City: Bismarck  
State/Province: ND  
Zip/Postal Code: 505050480  
Country: USA  
Card Type: MasterCard  
Card Number: \*\*\*\*\*3254