

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: 2/5/09 B.M.

AC 2009-014

Thomas J. Immel

Feldman, Wasser, Draper & Cox

1307 S. Seventh St.

P.O. Box 2418

Springfield, IL 62705

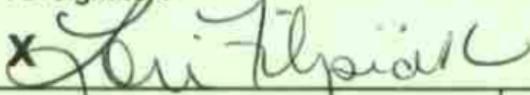
2. Article Number

(Transfer from service label)

7008 1830 0003 9908 8154

COMPLETE THIS SECTION ON DELIVERY

A. Signature


 Agent Addressee

B. Received by (Printed Name)

L F

C. Date of Delivery

02-11-09

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

 Yes