

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:
 AC 2011-006
 Patrick S. Belville
 207 Foxfire Court
 Downers Grove, IL 60515

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Shelley Childs* Agent Addressee

B. Received by (Printed Name) *Shelley Childs* C. Date of Delivery *9-8-10*

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

2. Article Number
 (Transfer from service label) *7009-0960-0000-5942-3358*