

**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: 4/5/12 B.M.  
 AS 2011-001  
 Thomas W. Dimond  
 Ice Miller LLP  
 200 W. Madison, Suite 3500  
 Chicago, IL 60606

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 0485

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*[Handwritten Signature]*

Agent

Addressee

B. Received by (Printed Name)

*Cellip McJames*

C. Date of Delivery

*4/11/12*

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

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1. Article Addressed to: 4/5/12 B.M.

AS 2011-001

Susan Charles

Ice Miller LLP

200 W. Madison, Suite 3500

Chicago, IL 60606

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 0492

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*[Handwritten Signature]*

Agent

Addressee

B. Received by (Printed Name)

*[Handwritten Name: Susan Charles]*

C. Date of Delivery

*[Handwritten Date: 4/11/12]*

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