SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X
1. Article Addressed to: 11/20/08 B.M. PCB 2005-035 Charles F. Helsten Hinshaw & Culberston 400 South Ninth Street Suite 200 Springfield, IL 62701	
	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
Article Number (Transfer from service label) 7008 1830 000	03 9908 7638
PS Form 3811, February 2004 Domestic Fiet	urn Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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.	A. Signature X Agent Addressee B. Received by (Printed Name) D. Is delivery address different from item 1? If YES, enter delivery address below:
1. Article Addressed to: 11/20/08 B.M. PCB 2005-035	
Edward R. Gower Hinshaw & Culbertson	
400 South Ninth Street Suite 200	3. Service Type
Springfield, IL 62701	Scentified Mail Express Mail
Springitera, in 02/01	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7008 1830 0003 9908 7645	
PS Form 3811, February 2004 Domestic Retu	um Receipt 102595-02-M-1540

