

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: 4/16/09 B.M.
 PCB 2009-081
 Ken Maschoff
 7475 State Route 127
 Caryle, IL 62231

2. Article Number

(Transfer from service label)

7008 1830 0003 9908 9588

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jessica Sellers

- Agent
 Addressee

B. Received by (Printed Name)

Jessica Sellers

C. Date of Delivery

4-20-09

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