SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent □ Addressee Print your name and address on the reverse so that we can return the card to you. B. Repelved by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. Is delivery address different from item 1? ☐ Yes 1. Article Addressed to: 5/7/09 B.M. □ No YES, enter delivery address below: PCB 2008-012 John F. Hiltz Arnstein & Lehr 120 South Riverside Plaza 3. Service Type Suite 1200 Certified Mail ☐ Express Mail Chicago, IL 60606-3910 Registered ☐ Return Receipt for Merchandise ☐ Insured Mail COD. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7008 1830 0003 9908 9649 (Transfer from service label) PS Form 3811, February 2004 Domestic Return 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 Agent Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1?
1. Article Addressed to: 5/7/09 B.M. PCB 2008-012 Attn: Morton Mobile Home Park, L.L. Thomas P. Conley, R.A.	It yes enter delivery address below:
120 S. Riverside Plaza, #1200 Chicago, IL 60606	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7008 1830 0003 9908 9670	
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse □ Addressee so that we can return the card to you. B/Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, 5-11-09 or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 5/7/09 B.M. 1. Article Addressed to: □ No If YES, enter delivery address below: PCB 2008-012 David L. Wentworth II Hasselberg, Williams, Grebe, Snodgrass & Birdsall Service Type 124 SW Adams, Suite 360 Certified Mail ☐ Express Mail Peoria, IL 61602-1320 ☐ Registered □ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7008 1830 0003 9908 9656 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540