

**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: 7/23/09 B.M.  
 PCB 2010-004  
 Keith & Kevin Erickson  
 1074 Knox Road, 2900N  
 Altona, IL 61414

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

 *Carl R Erickson*
 Agent Addressee

B. Received by (Printed Name)

CARL R ERICKSON

C. Date of Delivery

7/30/09

 D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

2878 Knox Hwy 3

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)

7008 1830 0003 9908 8994