

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: 9/17/09 B.M.

PCB 1997-193 104-207
 Clarissa Y. Cutler
 155 N. Michigan Avenue
 Suite 375
 Chicago, IL 60601

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 0180

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *H. Brandiss* Agent Addressee

B. Received by (Printed Name)

H. Brandiss

C. Date of Delivery

09-21-2009
 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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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to: 9/17/09 B.M.

PCB 1997-193

Mark A. LaRose

LaRose & Bosco, Ltd.

200 N. LaSalle Street

Suite 2810

Chicago, IL 60601

2. Article Number

(Transfer from service label) 7009 0960 0000 5942 0173

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Summers* Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

9/21/09

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