

**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: 3/18/10 B.M.  
 PCB 2009-038  
 Gabriel M. Rodriguez  
 Schiff Hardin, LLP  
 6600 Sears Tower  
 233 S. Wacker Drive  
 Chicago, IL 60606-6473

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 2030

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*[Handwritten Signature]*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

3-22-10

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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1. Article Addressed to: 3/18/10 B.M.

PCB 2009-038

David M. Loring

Schiff Hardin, LLP

6600 Sears Tower

233 S. Wacker Drive

Chicago, IL 60606-6473

2. Article Number

*(Transfer from service label)*

7009 0960 0000 5942 2054

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

B. Received by (*Printed Name*) Agent Addressee

C. Date of Delivery

3-22-10

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