( LINE CONTRACTOR STREET	ELECTROPERTS EL CEDE
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Dellvery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to: 6/17/10 B.M.</li> <li>AC 2009-054</li> <li>Phillip M. O'Donneff</li> <li>Kingery Durree Wakeman &amp; Ryan,</li> <li>Assoc.</li> <li>915 Commerce Building</li> <li>416 Main Street</li> </ul>	A. Signature A. Signature B. Received by (Proted Name) C. Date of Delivery C. Date of Del
	3. Service Type     -Si Certified Mail     Express Mail       Image: Provide the service of the ser
Peoria, IL 61602	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7009 0960 0000 5942 2689	
PS Form 3811, February 2004 Domestic Ret	um Receipt 102595-02-M-1540

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
The second se	A. Signature A. Signature A. Signature B. Received by (Printed Name) M. (Chelle, KVUMh0/2 D. is delivery address different from Item 1? If YES, enter delivery address below: M. Chelle, KVUMh0/2 M. Chelle, KVUMh
	3. Service Type         Service Type         Service Type         B-Certified Mail         Registered         Return Receipt for Merchandise         Insured Mail         C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7009 0960 0000 5942 2696	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	