

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: 6/17/10 B.M.

AC 2009-054

David J. Krumholz

9005 N. Frye Road

Peoria, IL 61615

COMPLETE THIS SECTION ON DELIVERY

A. Signature

DKrumholz

Agent

Addressee

B. Received by (Printed Name)

Michelle Krumholz

C. Date of Delivery

6-23-10

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

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 2665

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540