

**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: 9/2/10  
PCB 2010-031  
Gerald P. Callaghan  
311 S. Wacker Drive, Ste. 3000  
Chicago, IL 60606-6677

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
**DANIEL MILCHAREK**

B. Received by (Printed Name) C. Date of Delivery

**DANIEL MILCHAREK**  
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 7  
(Transfer from service label) 3  
7009 0960 0000 5942 3433