

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: 9/16/10 B.M.
PCB 2010-101
Kevin Saylor, P.E.
HDC Engineering, Inc.
201 West Springfield Avenue
Suite 300, P.O. Box 140
Champaign, IL 61824-0140

2. Article Number
(Transfer from service label) 7009 0960 0000 5942 3532

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Handwritten Signature] Agent
 Addressee

B. Received by (Printed Name) *Terra L. Charles* C. Date of Delivery

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

