

**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: 4/21/11 B.M.

PCB 2010-076

Robert M. Riffle

Elias, Meginnes, Riffle &  
Seghetti, P.C.

416 Main Street

Suite 1400

Peoria, IL 61602-1153

2. Article Number

(Transfer from service label)

7011 0110 0001 8269 7914

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

XX 127 by

 Agent Addressee

B. Received by (Printed Name)

Elias Meginnes

C. Date of Delivery

4/27/11

D. Is delivery address different from item 1?  YesIf 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