

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: 8/18/11 B.M.
 PCB 2011-103
 Robert J. Slobig
 Torshen, Slobig, Genden,
 Dragutinovich and Axel, Ltd.
 105 W. Adams Street
 Suite 3200
 Chicago, IL 60603

2. Article Number
 (Transfer from service label)

7011 0110 0001 8269 9185

COMPLETE THIS SECTION ON DELIVERY

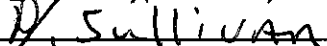
A. Signature

X

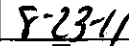


- Agent
 Addressee

B. Received by (Printed Name)



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