COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete ☐ Agent item 4 if Restricted Delivery is desired. ☐ Addressee Print your name and address on the reverse so that we can return the card to you. C. Date of Delivery B. Received by (Printed Name) Attach this card to the back of the mailpiece, 1-24-1 or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 10/20/11 B.M. Article Addressed to: □ No If YES, enter delivery address below: PCB 2012-039 Brittany F. Theis Whitt Law LLC 70 S. Constitution Drive Aurora, IL 60506 3. Service Type Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise Registered ☐ Insured Mail ☐ C.O.D. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7011 0110 0001 8269 9673 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540