SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete E. RYCRAFT Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse B. Received by (Print Name) 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. D. Is delivery address different from item 1? 1. Article Addressed to: 5/3/12 B.M. If YES, enter delivery address below: □ No AS 2012-001 Eric E. Boyd Seyfrath Shaw LLP 131 S. Deaborn Street Suite 2400 3. Service Type Chicago, IL 60603-5803 ☐ Certified Mail ☐ Express Mail □ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes Article Number 7011 0110 0001 8270 0683 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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: 5/3/12 B.M.
- AS 2012-001
- Ilana R. Morady Seyfarth Shaw LLP
- 131 S. Dornhorn Street
- Suite 2400
- Chicago, IL 60603-5803

COMPLETE THIS SECTION ON DELIVERY

A. Signature

E. RYCRAF

eceived by (Printer Name)

C. Date of Delivery D. Is delivery address different from item 17

☐ Express Mail

If YES, enter delivery address below:

☐ No

3. Service Type Certified Mail Registered

☐ Insured Mail COD. 4. Restricted Delivery? (Extra Fee)

☐ Return Receipt for Merchandise

2. Article Number 7011 8270 0690 (Transfer from service label) 0110 0001

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

☐ Yes