

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: 5/2/13 B.M.
PCB 2010-075
Elizabeth S. Harvey
Swanson, Martin & Bell
One IBM Plaza
330 N. Wabash, Suite 3300
Chicago, IL 60611

2. Article Number
(Transfer from service label)

7011 0110 0001 8270 4001

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X S. Hump

☐ Agent☐ Addressee

B. Received by (Printed Name)

S. Hump

C. Date of Delivery

5/6/13

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

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 5/2/13 B.M.
PCB 2010-075
Michael J. Maher
Swanson, Martin & Bell
One IBM Plaza
330 N. Wabash, Suite 3300
Chicago, IL 60601

2. Article Number

(Transfer from service label)

7011 0110 00018270 4018

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X S. Hump

☐ Agent☐ Addressee

B. Received by (Printed Name)

S. Hump

C. Date of Delivery

5/6/13

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

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: 5/2/13 B.M.
PCB 2010-075
Erin E. Wright
Swanson, Martin & Bell
One IBM Plaza
330 N. Wabash, Suite 3300
Chicago, IL 60611

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 4032

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X S. Hump

☐ Agent☐ Addressee

B. Received by (Printed Name)

S. Hump

C. Date of Delivery

5/6/13

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