

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: 7/11/13 B.M.

PCB 2012-092
Edward F. Flynn
Featherman, Gaumer, Postlewait,
Stocks, Flynn & Hubbard
225 N. Water Street
Suite 200
Decatur, IL 62523

2. Article Number
(Transfer from service label)

7011 01110 0001 8270 4537

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Susan Manner*

- Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-15-13

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

102595-02-M-1540