

**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: 8/8/13 B.M.  
PCB 2013-061 & PCB 2013-068  
William D. Ingersoll  
Brown, Hay & Stephens LLP  
205 South Fifth Street  
Suite 700  
P.O. Box 2459  
Springfield, IL 62705-2459

2. Article Number  
(Transfer from service label) 7011 0110 0001 8270 4889

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Brittany Lambert* 08 AUG 2013 PM  
 Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
AUG 12 2013

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

Domestic Return Receipt

102595-02-M-1540