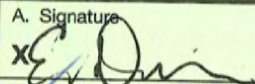


SENDER: COMPLETE THIS SECTION

- 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: 9/5/13 B.M.
 PCB 2005-196
 Jeffrey R. Diver
 Jeffrey R. Diver, P.C.
 2S741 Crimson King Lane
 Glen Ellyn, IL 60137

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent
 Addressee

B. Received by (*Printed Name*) C. Date of Delivery

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

2. Article Number

(*Transfer from service label*)

7011 0110 0001 8270 5060

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540