

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: 12/19/13 B.M.
PCB 2013-039
Katherine D. Hodge
Hodge Dwyer & Driver
3150 Roland Avenue
P.O. Box 5776
Springfield, IL 62705-5776

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Michael Patterson Jr. Agent
 Addressee

B. Received by (*Printed Name*)
Michael Patterson Jr. C. Date of Delivery
12-27-13

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

2. Article Number
(*Transfer from service label*) 7011 0110 0001 8270 6074

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540