

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.
 AC 2014-004
 Mark & Cheryl Rogers
 17310 N. State Hwy 78
 Canton, IL 61520

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Mark Rogers

B. Received by (Printed Name) C. Date of Delivery
Mark Rogers *12-24-13*

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 5978