

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: 11/5/08 B.M.
 PCB 2007-104
 Gary A. Peters
 Howard & Howard Attorneys, P.C.
 One Technology Plaza
 211 Fulton Street, Suite 600
 Peoria, IL 61602-1350

2. Article Number

(Transfer from service label) 7008 1830 0003 9908 7546

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Coleen Willmet*

Agent

Addressee

B. Received by (Printed Name)

Coleen Willmet

C. Date of Delivery

11-12-08

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

RECEIVED
 NOV 17 2008
 STATE OF ILLINOIS
 CONTROL BOARD