

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: 6/4/09 B.M. ✓
 PCB 2009-045
 Edward Q. Costa
 Samuels, Miller Schroeder,
 Jackson & Sly
 225 North Water Street, Ste. 301
 P.O. Box 1400
 Decatur, IL 62525-1400

2. Article Number

(Transfer from service label)

7008 1830 0003 9908 8499

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Pat McQueen* Agent Addressee

B. Received by (Printed Name)

PAT McQUEEN

C. Date of Delivery

6/12/09

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