

**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: 11/5/09 B.M.

PCB 2003-191  
 Richard S. Proter  
 Hinshaw & Culbertson  
 100 Park Avenue  
 P.O. Box 1389  
 Rockford, IL 61105-1389

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 0845

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Richard S. Proter*

Agent

Addressee

B. Received by (Printed Name)

*Lee Langs*

C. Date of Delivery

NOV 9 2009

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

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1. Article Addressed to: 11/5/09 B.M.  
 PCB 2003-191  
 Scott M. Belt  
 Scott M. Belt & Associates,  
 P.C.  
 105 E. Main Street  
 Suite 206  
 Morris, IL 60450

2. Article Number  
 (Transfer from service label)

7009 0960 0000 5942 0883

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*\*Margaret Foster*  Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

11-10-09

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