

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: 1/7/10 B.M.
 AS 2009-003
 Elizabeth S. Harvey
 Swanson, Martin & Bell
 One IBM Plaza
 330 N. Wabash, Suite 3300
 Chicago, IL 60611

COMPLETE THIS SECTION ON DELIVERY

A. Signature Age
 X S. Harvey Add

B. Received by (Printed Name) C. Date of D

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 Merch
 Insured Mail C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes

2. Article Number 7009 0960 0000 5942 1408
 (Transfer from service label)
 PS Form 3811, February 2004 Domestic Return Receipt