

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:
Office of the State's Attorney
Daniel Brenner
Assistant State's Attorney
Jackson County Courthouse
3rd Floor
M'Box, IL 62966

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
Michelle Johnson

C. Date of Delivery
8-10-10

D. Is delivery address different from item 1?
If YES, enter delivery address below:
 Yes
 No

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

7008 3230 0001 4603 2331

Domestic Return Receipt

102595-02-M-1540