SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X
1. Article Addressed to: 12/2/10 B.M. PCB 2009-087 / 0 5 Edward W. Dwyer Hodge Dwyer & Driver 3150 Roland Avenue P.O. Box 5776 Springfield, IL 62705-5776	
	3. Service Type Certified Mail Express Mall Registered Return Receipt for Merchandise Insured Mail C.O.D.
W-1	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7009 0960 0000 5942 4003	
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