

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: 1/6/11 B.M.
 PCB 2011-020
 Bruce Biagini
 Flack, McRaven & Stephens
 22 West Side Courthouse Square
 P.O. box 359
 Macomb, IL 61455

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 4652

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Lawrence J. Kwakala

Agent

Addressee

B. Received by (Printed Name)

LAWRENCE J. KWAKALA

C. Date of Delivery

1-10-11

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