

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: 4/7/11 B.M.
PCB 2004-185 & PCB 2004-215
N. LaDonna Driver
Hodge Dwyer & Driver
3150 Roland Avenue
P.O. Box 5776
Springfield, IL 62705-5776

2. Article Number

(Transfer from service label)

7011 0110 0001 8269 7570

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Michael Patterson

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

APR 11 2011

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

USPS

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: 4/7/11 B.M.
PCB 2004-185 & PCB 2004-215
Keith I. Harley
Chicago Legal Clinic, Inc.
211 W. Wacker Drive
Suite 750
Chicago, IL 60606

2. Article Number

(Transfer from service label)

7011 0110 0001 8269 7594

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Tamika Moore

☐ Agent

☐ Addressee

B. Received by (Printed Name)

TAMIKA MOORE

C. Date of Delivery

4/11/11

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes