

**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: 5/17/12 B.M.  
 PCB 2011-074  
 Adolph M. Lo  
 906 W. Curtis Road  
 Champaign, IL 61821

2. Article Number  
 (Transfer from service label) 7011 0110 0001 8270 0898

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *R Lo*  Agent  
 Addressee

B. Received by (Printed Name) *R Lo* C. Date of Delivery *5/24/12*

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