

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:

BN, 812-113

AC 2014-001

*
Bonan Bonan and Rowland, LLC
North Side Square
P.O. Box 309
AcLeansboro, IL 62859

Article Number
(Transfer from service label)

7011

0110

0001

8270

4988

Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Olivia Sotomayor

Agent

Addressee

B. Received by (Printed Name)

Olivia Sotomayor

C. Date of Delivery

AUG 26 2013

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

102595-02-M-1540