


**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

M/1 HOMES OF CHICAGO  
IL CORP SERVICE COMPANY  
801 ADLAI STEVENSON DR  
#100  
SPRINGFIELD, IL 62703



9590 9402 8310 3094 6080 44

2. Article Number (Transfer from service label)

7022 1670 0002 8011 7154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Keaton Means*  Agent  Addressee

B. Received by (Printed Name) **Keaton Means** C. Date of Delivery **SEP 18 2023**

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Insured Mail                               |
| <input type="checkbox"/> Insured Mail                            |   |