

ORIGINAL

RECEIVED
CLERK'S OFFICE

MAY 02 2005

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: 4/21/05 B.M.
AC 2005-007
Edward and Betty Jo Cain
807 West Church Street
Savoy, IL 61874

2. Article
(Transit)

PS For

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Betty Cain* Agent Addressee

B. Received by (Printed Name), *Betty Cain* C. Date of Delivery *4-28-05*

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

02595-02-M-1540