

RECEIVED  
CLERK'S OFFICE

DEC 20 2007

STATE OF ILLINOIS  
Judicial Administration Control Board

ORIGINAL

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: 12/6/07 B.M.  
PCB 2007-084  
Penni S. Livingston  
Livingston Law Firm  
5701 Perrin Road  
Fairview Heights, IL 62208

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
*Samantha Ballard*  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Samantha Ballard* 12-12-07

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

2. Article Number  
(Transfer from service label) 7006 0810 0004 2225 6681