

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: 5/7/09 B.M.
 PCB 2009-083
 Gary Donley
 P.O. Box 220
 Carthage, IL 62321

2. Article Number

(Transfer from service label) 7008 1830 0003 9908 9809

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jaclyn Duffy*

Agent

Addressee

B. Received by (Printed Name)

Jaclyn Duffy

C. Date of Delivery

5-11-09

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