

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: 6/18/09 B.M.
 PCB 2003-191
 Scott M. Belt
 Scott M. Belt & Associates, P.C.
 105 E. Main Street
 Suite 206
 Morris, IL 60450

2. Article Number

(Transfer from service label) 7008 1830 0003 9908 8697

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Scott M. Belt* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

6/18/09

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

