

**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: 1/21/10 B.M.  
 AC 2008-005  
 James P. Brinkoetter, Jr.  
 Brinkoetter & Barnard  
 250 North Water, Ste. 310  
 Decatur, IL 62523

2. Article Number

(Transfer from service label) 7009 0960 0000 5942 1521

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*James P. Brinkoetter, Jr.*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 1/21/10 B.M.  
 AC 2008-005  
 Kenneth Boles ✓  
 Macon County State's Attorney  
 253 East Wood Street  
 4th Floor  
 Decatur, IL 62523

2. Article Number

(Transfer from service label)

7009 0960 0000 5942 1545

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *T. Eubanks*  Agent  
 Addressee

B. Received by (Printed Name)

T. EUBANKS

C. Date of Delivery

1/26/10

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