

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: 8/5/10 B.M.
PCB 2010-018
c/o Stephen Schauble
Schauble Development, LLC
2426 W. Cornerstone Ct.
#100
Peoria, IL 61514-2492

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Denise DeDeder Addressee

B. Received by (Printed Name) Yes
Denise DeDeder C. Date of Delivery No
8-9-10

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

2. Article Number
(Transfer from service label)

7009 0960 0000 5942 3112

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540