

**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: 2/2/12 B.M.

AC 2012-012

Mary A. Fleming

DuPage County State's Attorney  
Office503 North County Farm Road  
Wheaton, IL 60187

2. Article Number

*(Transfer from service label)*

7011 0110 0001 8270 2595

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Juan M. Romero* Agent Addressee

B. Received by (Printed Name)

JUAN M. ROMERO

C. Date of Delivery

2/7

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