

**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: 8/9/12 B.M.

PCB 2006-055

Amy L. Jackson

Rammelkamp Bradney, P.C.

232 West State Street

P.O. Box 550

Jacksonville, IL 62651-550

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 1536

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Mary Jackson* Agent Addressee

B. Received by (Printed Name)

*Mary Jackson*

C. Date of Delivery

*8/16/12*D. Is delivery address different from [redacted] Yes  
If YES, enter delivery address below:  No

AUG 16 2012

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes