

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.

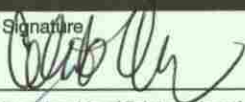
1. Article Addressed to: 8/9/12 B.M.
 AC 2012-060
 Howard Clifton, Trustee
 P.O. Box 1731
 Mt. Vernon, IL 62864

2. Article Number
 (Transfer from service label) 7011 0110 0001 8270 1529

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X


 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

8-16-12

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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1. Article Addressed to: 8/9/12 B.M.
 AC 2012-060
 Dennis L. Shafer, R.A.
 Clifton Salvage, Inc.
 1908 Broadway
 Mt. Vernon, IL 62864

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 1512

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Kelsey Larson

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

8/16/12

D. Is delivery address different from item 1? Yes

No

If YES, enter delivery address below:

*407 S 27th St
 Mt Vernon, IL 62864*

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes