

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: 7/11/13 B.M.
AC 2013-051 & AC 2013-052
William T. Donahue
Vermilion County State's
Attorney Office
Court House
7 North Vermilion Street
Danville, IL 61832

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 4483

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jessica Cox

Agent

Addressee

B. Received by (Printed Name)

Jessica Cox

C. Date of Delivery

7-15-13

D. Is delivery address different from item 1?
If YES, enter delivery address below:

Yes

No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

102595-02-M-1540