

**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:

*Melita*

*SPORA-07-2006-0257*

Karen L. Prena  
Mayer Brown Rowe & Maw LLP  
71 South Wacker Drive  
Chicago, Illinois 60606-4637

2. Article Number  
(Transfer from service lat

*7004 2510 0006 9718 3186*

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*X* 

Agent

Addressee

B. Received by (Printed Name)

*J. R. ...*

C. ~~2006~~ Delivery

*OCT 5/10/06*

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