

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:

Mr. Heidi E HANSON
Attorney at Law
4721 Franklin Ave, Ste 1500
Western Springs, IL
60558

CAA-05-2009-0022

2. Article Number

(Transfer from serv

7001 0320 0005 8919 2683

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Heidi Hanson

06/05/09

C. Signature

X

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes

☐ No

JUN 09 2009

REGIONAL HEARING CLERK

USPS

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

REGION 5

☐ Express Mail

☐ Return Receipt for Merchandise

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes