

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:

Andrew H. Perellis, Attorney
 Seyfarth Shaw, LLP
 131 South Dearborn St., Ste. 2400
 Chicago, IL 60603-5577

2. Article Number

(Transfer from service label)

7001 0320 0005 8918 8006

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by: *Please Print Clearly* B. Date of Delivery

C. Signature

Agent
 Addressee

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

MAY 03 2001

3. Service Type

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

4. Restricted Delivery? (Extra Fee) Yes

**U.S. Postal Service
 CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0005 8918 8006

7001 0320 0005 8918 8006
 EPCRA-US-20.7-0017 MA-US-000

Postage	\$ 8.03
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Ser Andrew H. Perellis, Attorney
 Str. Seyfarth Shaw, LLP
 or / 131 South Dearborn St., Ste 2400
 City Chicago, IL 60603-5577

PS or Instructions