

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:

Lisa Escznk, President
 Circom, Inc.
 505 West Main St.
 Bensenville, Illinois 60106-2180

2. Article Number
 (Transfer from service label) **7001 0320 0005 8910 5201**

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Heather C Wilk** B. Date of Delivery **5/21/07**

C. Signature **X [Signature]** Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

EPCRA-05-2007-0020

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

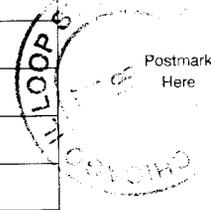
4. Restricted Delivery? (Extra Fee) Yes

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

Sonja Brook-Woodard E-13J (provided)

EPCRA-05-2007-0020

Postage	\$ 80
Certified Fee	265
Return Receipt Fee (Endorsement Required)	215
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 560



Sent To Lisa Escznk, President
 Circom, Inc.
 Street, Apt. No., or PO Box No. 505 West Main St.
 City, State, ZIP+ Bensenville, Illinois 60106-2180

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