

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:

Kathryn A. Watson
Attorney At Law
Spalding & Hilmes, PC
330 South Downey Aveune
Indianapolis, Indiana 46219-7047

CWA-05-2010-0013

2. Article Number

(Transfer from service label)

7009 1680 0000 7666 0921

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

Rebecca Forlass 8/25/10

C. Signature

X Rebecca Forlass

Agent

Addressee

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

RECEIVED
AUG 30 2010

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail Signature Required

4. Restricted Delivery? (Extra Fee)

Yes