

**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:

Francis X. Lyons, Attorney  
 Bell, Boyd & Lloyd, L.L.C.  
 70 West Madison Street, Suite 3100  
 Chicago, IL 60602-4207

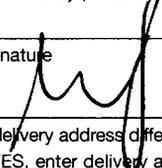
2. Article Number  
 (Transfer from service label)

7001 0320 0005 8918 7733

PS Form 3811, March 2001

**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

**JUN 07 2007**

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

4. Restricted Delivery? (Extra Fee)  Yes

7001 0320 0005 8918 7733

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

**EPCRA-05-2007-0022**

|  |         |               |
|--|---------|---------------|
| Complaint Postage                              | \$ 1.48 | Postmark Here |
| Certified Fee                                  | 2.65    |               |
| Return Receipt Fee (Endorsement Required)      | 2.13    |               |
| Restricted Delivery Fee (Endorsement Required) |         |               |
| Total Postage & Fees                           | \$ 6.26 |               |

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for Instructions