

**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: 12/16/10 B.M.

PCB 2011-014

Dennis M. Wilt

Waste Management of Illinois,  
Inc.

720 East Butterfield Road

Lombard, IL 60148

2. Article Number

*(Transfer from service label)*

7009 0960 0000 5942 4195

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X  Agent AddresseeB. Received by (*Printed Name*)

SIMON MARKOVIC

C. Date of Delivery

12-20-10

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes