

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: 3/17/16 B.M.
PCB 2016-092
Mark VonHoltén
19170 Rush Road
Lyndon, IL 61261

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Mark VonHoltén Addressee

B. Received by (Printed Name) C. Date of Delivery
Mark VonHoltén 3/21/16

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery (Enter Fee) Yes



Domestic Return Receipt