

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Dustin Hassler</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (<i>Printed Name</i>)      C. Date of Delivery  <i>SCOTT HASSLER</i>      <i>3-6</i></p>
<p>1. Article Addressed to:    3/2/17 B.M.  AC 2017-008  Dustin Hassler  2153 E. Hampshire Road  Moroa, IL 61756</p>	<p>D. Is delivery address different from item 1?    <input type="checkbox"/> Yes  If YES, enter delivery address below:    <input type="checkbox"/> No</p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail®    <input type="checkbox"/> Priority Mail Express™  <input type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>)    <input type="checkbox"/> Yes</p>
<p>2. Article Number  (Transfer from service label)</p>	<p>7014 0510 0001 5481 0948</p>
<p>PS Form 3811, July 2013      Domestic Return Receipt</p>	

RECEIVED  
CLERK'S OFFICE  
MAR 08 2017  
STATE OF ILLINOIS  
Pollution Control Board