

**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 the front if space permits.

1. Article Addressed to: 8/23/18 B.M.  
PCB 2019-006  
Austin Betzold  
18302 White Settlement Trail  
Nokomis, IL 62075

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 [Signature]  Addressee  
B. Received by (Printed Name) C. Date of Delivery

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

RECEIVED  
CLERK'S OFFICE  
SEP 04 2018  
STATE OF ILLINOIS  
Pollution Control Board

3. Service Type  
 Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery  
4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
(Transfer from service label) 7014 0510 0001 5481 3215