SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery Agent Addressee B. Received by (Printed Name) C. Date of Delivery Place O Is delivery address different from item 1? Yes If YES, enter delivery address below:
1. Article Addressed to: 1/6/11 B,M. AC 2010-017 Mike Whitlock Perry Ridge Landfill 6305 Sacred Heart Road DuQuion, IL 62832	
	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7009 0960 0000 5942 4232	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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: 1/6/11 B.M. AC 2010-017 Jennifer Foutch Perry County State's Attorney One Public Square Pickneyville, IL 62274	A. Signature X
	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7009 0960 0000 5942 4218	
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540