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 X Agent Addressee B. Begeived by (Printed Name) C. Date of Delivery 10-20-11 D. Is delivery address different from item 1? Yes
1. Article Addressed to: 10/18/12 B.M. PCB 2012-131 Larry D. Welch 3336 Meadow Trail E DeKalb, IL 60115	If YES, enter delivery address below: No
	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label) 7011 0110 0001	8270 2151
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540