

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: 7/6/17 B.M.
PCB 2017-072 & PCB 2017-081
Darrell Wahe
904 Cottonwood Ct.
Burlington, IA 52601

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Doris Champagne*

- Agent
- Addressee

B. Received by (Printed Name)

Doris Champagne

C. Date of Delivery

- Is delivery address different from item 1? Yes
- YES, enter delivery address below: No

RECEIVED
CLERK'S OFFICE

JUL 21 2017

STATE OF ILLINOIS
Pollution Control Board

3. Service Type

- Certified Mail®
- Registered
- Insured Mail
- Priority Mail Express™
- Return Receipt for Merchandise
- Collect on Delivery

4. Restricted Delivery? (Extra Fee)

- Yes

2. Article Number
(Transfer from service label)

7014 0510 0001 5481 1440

PS Form 3811, July 2013

Domestic Return Receipt