

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: 1/25/18 B.M.
PCB 2018-043
Scott Dean
Scott Dean Swine Farm
2222 East Highway 24
Astoria, IL 61501

2. Article Number
(Transfer from service label)

7014 0510 0001 5481 2836

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Scott Dean Agent
 Addressee

B. Received by (Printed Name)
Scott Dean

C. Date of Delivery
1/30/2018

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

RECEIVED
CLERK'S OFFICE
FEB 03 2018
STATE OF ILLINOIS
Pollution Control Board

Domestic Return Receipt