| | 199 PM |
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| 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: 12/21/17 B⋅M⋅PCB 2018-021 Todd Parish 3395 Harco Road | A. Signature A. Signature Addressee Addressee C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below: |
| Harrisburg, FR 62946 V C CLERK'S OFFICE JAN 0 3 2018 | 3. Service Type Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery |
| STATE OF ILLINOIS 2. A Pollution Control Board | 4. Restricted Delivery? (Extra Fee) ☐ Yes |
| PSF | |