

**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: 11/15/18 B.M.  
PCB 2019-067  
Steve Bader  
5876 Bowden Road  
Scales Mound, IL 61075

2. Article Number  
(Transfer from service label)

7014 0510 0001 5481 3499

PS Form 3811, July 2013

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 *Steve Bader*  Addressee

B. Received by (Printed Name)

C. Date of Delivery  
11-19-18

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  
CLEAN AIR  
DEC 28 2018  
STATE OF ILLINOIS  
Pollution Control Board

*Steve Bader*