

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: 5/3/17 B.M.
PCB 2017-060 & PCB 2017-061
David M. Anderson
David J. Anderson Farm Trust
23774 925 East Street
Walnut, IL 61376

2. Article Number
(Transfer from service label)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x *David M Anderson* Agent
 Addressee

B. Received by (Printed Name)
David M Anderson

C. Date of Delivery
5-8-17

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

RECEIVED
CLERK'S OFFICE
JUN - 6 2017

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes

7014 0510 0001 5481 1242

Domestic Return Receipt