

**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:

Robert Yehl  
 Water Director  
 City of Bloomington Water Treatment Plant  
 25515 Waterside Way  
 Hudson, Illinois 61748  
 CAA-05-2017-0032

2. Article Number

(Transfer from service label)

7009 1680 0000 7662 6859

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Theresa M. Tarrant*

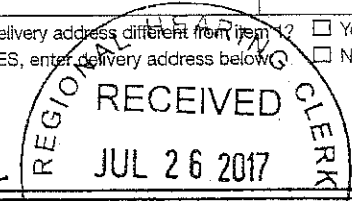
Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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



3. Service Type

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

4. Restricted Delivery (Extra Fee)

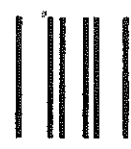
Yes

PS Form 3811, July 2013

Domestic Return Receipt

UNITED STATES POSTAL SERVICE

CHICAGO  
 IL 60618  
 24 JUL 17  
 09:41



First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box•



LADAWN WHITEHEAD  
 REGIONAL HEARING CLERK  
 U.S. EPA - REGION 5 - E19J  
 77 WEST JACKSON BLVD  
 CHICAGO, IL 60604

CAA-05-2017-0032