

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

7009 2820 0001 4359 5814

Postage	\$	000480
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

SEP 18 10:11 AM
 Postmark Here

WILLIAM T. & MARIANA HARDING TRUST EL AL
 C/O: D/768TAX B2-122A
 3333 BEVERLY RD.
 HOFFMAN ESTATES, IL 60192

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:

WILLIAM T. & MARIANA HARDING TRUST EL AL
 C/O: D/768TAX B2-122A
 3333 BEVERLY RD.
 HOFFMAN ESTATES, IL 60192

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
 Addressee
 X *C. Conner*
- B. Received by (Printed Name) C. Date of Delivery
C. CONNER 9-23
- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail |
| <input type="checkbox"/> Registered | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> C.O.D. |

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

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