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:	A. Signature X
Syste 203 Westchester, IL 60154-2562	3. Service Type Certified Mall
2. Article Number (Transfer from service label)	3460 0003 2590 5762
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1	

762	U.S. Postal Service ™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)			
57	For delivery information visit our website at www.usps.com®			
3460 0003 2590	OFFICIAL USE			
	Postage	\$		
	Certified Fee			
	Return Receipt Fee (Endorsement Required)		Postmark Here	
	Restricted Delivery Fee (Endorsement Required)		sent out 6/10/15	
	Total Postage & Fees	\$	6/10/	
7012	Sant To Street, Apr. No.; Or PO Box No.; 1127 S. Mannhein, Rd Str City, State, ZIP+4 Westchester, FL 60154-256			
	PS Form 3800, August 2006 See Reverse for Ins			

From: Batorski, Christina

Sent: Wednesday, June 17, 2015 8:01 AM

To: Berlin, Steve

Cc: Owen, Christopher Subject: RE: Raffle Gift

Steve,

Just to come full circle, attached is the certified mail receipt and signature card from IOS that they received the gift card

returned. Chrissy

Christina Batorski, PHR Deputy Commissioner

Department of Human Resources