

ORIGINAL

RECEIVED
CLERK'S OFFICE

SEP 16 2005

STATE OF ILLINOIS
Pollution Control Board

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: 9/1/05 BM
PCB 2004-139
R. Samuel Postlewait
Winters, Featherstun, Gaumer,
Postelwait, Stocks & Flynn
225 N. Walter St., Ste. 200
P. O. Box 1760
Decatur, IL 62525

2. Article Number 7005 1160 0002 2069 3602
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *R. Samuel Postlewait*

☐ 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

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes