



**Jay Scott**  
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Macon County, Illinois

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Dated: October 16, 2018

Mr. Don Brown, Asst. Clerk of the Board  
Illinois Pollution Control Board  
100 West Randolph Street  
James R. Thompson Center, Suite 11-500  
Chicago, Illinois 60601-3218

Re: County of Macon v. Gary Miller  
IPCB Case No. AC 2019-006

Dear Mr. Brown:

Please be advised that service was had on Respondent, Kori Rice, on October 10, 2018. In order to avoid a default, a Petition for Review must be filed with the Illinois Pollution Control Board on or before November 14, 2018.

A copy of the service document is attached hereto.

Sincerely,

A handwritten signature in blue ink, appearing to read "Michael B. Baggett".

Michael B. Baggett  
Assistant State's Attorney

Enclosures

Cc: Laurie Rasmus, Macon County Environmental Management Dept.  
Jeff Turner, IEPA Champaign Regional Office  
James Jennings, IEPA  
FOS File

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

ADMINISTRATIVE CITATION

MACON COUNTY	)	
ENVIRONMENTAL MGT. DEPT.,	)	
	)	IPCB Case No. AC 2019-006
Complainant,	)	Administrative Citation: ACL-2018-MC-006
	)	(MCEMD No. 2018-006: LPC1158125046)
v.	)	
	)	
Kori Rice,	)	
	)	
Respondent.	)	

NOTICE OF FILING

To: Ms. Kori Rice  
1896 Piatt Road  
Monticello, IL 61856

PLEASE TAKE NOTICE that on this date I electronically filed with the Clerk of the Pollution Control Board of the State of Illinois the following instrument(s) entitled CERTIFIED MAIL RECEIPT.

Dated: October 16, 2018

Respectfully submitted,



Michael B. Baggett, Asst. State's Attorney

Macon County State's Attorney's Office  
Macon County Courthouse  
253 E. Wood Street  
Decatur, IL 62523-1496  
217/424-1400

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

MONTICELLO, IL 61856

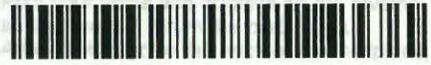
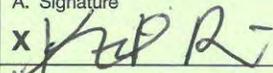
**OFFICIAL USE**

Postage	\$3.45	0221
Certified Fee	\$2.75	08
Return Receipt Fee (Endorsement Required)	\$0.00	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	10/05/2018
Total Postage & Fees	\$7.53	USPS 62523

Sent To  
 Street, Apt or PO Box  
 City, State

**Ms. Kori Rice**  
**1896 Piatt Road**  
**Monticello, IL 67856**

PS Form 3800, August 2006

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ </p> <p>or on the front of space permits.</p>	<p>A. Signature                  x  <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)                  Kori Rice</p> <p>C. Date of Delivery                  10-10-18</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p><b>Ms. Kori Rice</b>  <b>1896 Piatt Road</b>  <b>Monticello, IL 67856</b></p> </div>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                  If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>2. Article Number <b>7006 2150 0002 1705 8086</b>                  (Transfer from se.....)</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>