

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: 12/20/18 B.M.
PCB 2016-014
Mario Treto
Corporation Counsel
City of Evanston Law Department
2100 Ridge Road
Evanston, IL 60201

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3673

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

S. Chetw *[Signature]* 12-26

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Richard Rinchich
Director of Public Works
City of Oak Forest
15440 S. Central Avenue
Oak Forest, IL 60452

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3727

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

BESOWSHEL 12-26-18

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Michael J. Marovich
10759 W. 159th St.
Suite 201
Orland Park, IL 60601

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3741

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

M. Meyers 12/26/18

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Lindsay Birt, Ph.D
Huff & Huff
915 Harger Road
Suite 330
Oak Brook, IL 60523

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 3949

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

X *Stroesch*

C. Date of Delivery

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

STATE OF ILLINOIS
Pollution Control Board

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Christopher J. Cummings
Christopher J. Cummings, P.C.
2014 Hickory Road, Suite 205
Homewood, IL 60430

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 3581

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Christopher*☐ Agent☒ Addressee

B. Received by (Printed Name)

X *Christopher*

C. Date of Delivery

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

DEC 28 2018

STATE OF ILLINOIS
Pollution Control Board

3. Service Type

☐ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Michael R. Stiff
Spesia and Taylor
1415 Black Road
Joliet, IL 60435

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 3765

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☒ Agent☐ Addressee

B. Received by (Printed Name)

X *[Signature]*

C. Date of Delivery

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

DEC 28 2018

STATE OF ILLINOIS
Pollution Control Board

3. Service Type

☐ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>Nancy Kemper</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Nancy Kemper</i> C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
1. Article Addressed to: 12/20/18 B.M. PCB 2016-014 Chuck Anthony, Attorney Caterpillar, Inc. 100 NE Adams St. Peoria, IL 61629		3. Service Type <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label) 7014 0510 0001 5481 3789			
PS Form 3811, July 2013 Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>Stis Brown</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Stis Brown</i> C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
1. Article Addressed to: 12/20/18 B.M. PCB 2016-014 Andrew N. Fiske Holland & Knight, LLC 131 S. Dearborn Street 30th Floor Chicago, IL 60603 1		3. Service Type <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label) 7014 0510 0001 5481 3710			
PS Form 3811, July 2013 Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
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1. Article Addressed to: 12/20/18 B.M. PCB 2016-014 Margaret T. Conway Metropolitan Water Reclamation District 100 E. Erie Street Chicago, IL 60611		3. Service Type <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label) 7014 0510 0001 5481 3697			
PS Form 3811, July 2013 Domestic Return Receipt			

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Eric E. Boyd
Thompson Coburn LLP
55 E. Monroe Street
Chicago, IL 60603

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3802

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
David J. Freeman
Robbins, Schwartz, Nicholas,
Lifton & Taylor, Ltd.
631 E. Boughton Road
Suite 200
Bolingbrook, IL 60440

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3611

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
John P. Antonopoulos
Antonopoulos & Virterl, PC
15419 127th Street
Suite 100
Lemont, IL 60439

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3659

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to: 12/20/18 B.M.

PCB 2016-014
James G. McCarthy
Village of Skokie
5127 Oakton Street
Skokie, IL 60077

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3680

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to: 12/20/18 B.M.

PCB 2016-014
Carl R. Buck
Rathbun, Cservenyak & Kozol, LLC
3620 Executive Drive
Joliet, IL 60431

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3857

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 12?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to: 12/20/18 B.M.

PCB 2016-014
David Rieser
K & L Gates, LLP
70 W. Madison Street
Suite 3100
Chicago, IL 60602

2. Article Number

(Transfer from service label) 7014 0510 0001 5481 3819

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Martin J. Shanahan, Jr.
Corporation Counsel
City of Joliet
150 West Jefferson Street
Joliet, IL 60432-4156

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 3796

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *K. Benson*☐ 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®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Katherine D. Hodge
Heplerbroom, LLC
4340 Acer Grove Drive
Springfield, IL 62711

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 3635

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Lisa Fortner*☐ Agent☐ Addressee

B. Received by (Printed Name)

Lisa Fortner

C. Date of Delivery

12/27/18

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

3. Service Type

☐ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to: 12/20/18 B.M.
PCB 2016-014
Felicia L. Frazier
Odelson & Sterk, Ltd.
3318 W. 95th Street
Evergreen Park, IL 60642

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 3833

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Quell Kutt*☐ Agent☐ Addressee

B. Received by (Printed Name)

Quell Kutt

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®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes