

## 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: 7/22/04 B.M.

AC 2004-085

Ms. Carol A. Schenk

Estate of Roy G. Frietsch

5800 S. Adams

Bartonville, IL 61607

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ronald J. Schenk*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-29-04

D. Is delivery address different from item 1? ☐ YesIf 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

2. Article Number

(Transfer from service label) 7002 2030 0004 5523 9057

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

RECEIVED  
CLERK'S OFFICE

AUG - 2 2004

STATE OF ILLINOIS  
Pollution Control Board