

ORIGINAL

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SEP 17 2004

STATE OF ILLINOIS
Pollution Control Board

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>Lisa Rankin</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: 9/2/04 B.M. AC 2005-011 Gene Stacey Environmental Reclamation Company Route 316 West P.O. Box 137 Charleston, IL 61920	B. Received by (Printed Name) <i>Lisa Rankin</i>	C. Date of Delivery <i>9/15</i>
2. Article Number (Transfer from service label) 7004 1160 0005 4126 2632	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540	
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.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

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1. Article Addressed to: 9/2/04 B.M. AC 2005-011 Registered Agent CT Corporation System 208 S. LaSalle Street, Suite 804 Chicago, IL 60604	B. Received by (Printed Name) <i>[Signature]</i>	C. Date of Delivery <i>9/15</i>
2. Article Number (Transfer from service label) 7004 1160 0005 4126 2649	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540	
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.		
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