

ORIGINAL

RECEIVED  
CLERK'S OFFICE

SEP 22 2004

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: 9/16/04 B.m.  
AC 2005-013  
Roy Bruce  
18456 E. Hawk Road  
Mt. Vernon, IL 62864

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*x Kim Bruce*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*9/22/04*

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

2. Article Number  
(Transfer from service label) 7004 1160 0005 4123 1614