RECEIVED CLERK'S OFFICE

OCT 15 2003

STATE OF ILLINOIS Pollution Control Board



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature	☐ Agent ☐ Addressee
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.	B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to: 10/7/04 B.M. PCB 2005-001	D. Is delivery address different from iter If YES, enter delivery address belo	w: 🗆 No
Gerald P. Callaghan, Esq.		A GRAN
Freeborn & Peters		
311 S. Wacker Drive, Ste. 3000 Chicago, IL 60606-6677	3. Service Type Certified Mail	il alpt for Merchandise
	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label) 7004 1160 000	5 4126 3905	
PS Form 3811, February 2004 Domestic Ret	urn Receipt	102595-02-M-1540
	COMPLETE THIS SECTION ON DELI	VERY
SENDER: COMPLETE THIS SECTION	A. Signature	☐ Agent
Complete items 1, 2, and 3. Also complete	Kta	☐ Addressee
item 4 if hestilotog and oddress on the reverse	B. Received by (Printed Name)	C. Date of Delivery
so that we call tetathe back of the mailpiece,	address different from ite	m 1? Yes
or on the front if space t	D. Is delivery address units of the property address below if YES, enter delivery address below in the property address below the property address the prope	ow: □ No
1. Article / Idans		
PCB 2005-001	Wir .	l 4 2004
Paul A. Duffy Freeborn & Peters		
311 S. Wacker Drive, Ste. 3000 Chicago, IL 60606-6677	3. Service Type 3. Opertified Mail	
·	Insured Mail LI C.O.D.	☐ Yes
	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7004 1160 00 (Transfer from service label)	05 4126 3899	102595-02-M-154
Omestic 2811 February 2004 Domestic	Return Receipt	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DEL	.IVERY
■ Complete items 1, 2, and 3. Also complete	A. Signature	
item 4 if Restricted Delivery is desired.	* Lanis L Nau	☐ Agent☐ Addressee
■ Print your name and address on the reverse so that we can return the card to you.	B. Received by (Printed Name)	C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	JANIS ROSAUER	10-14-04
1. Article Addressed to: 10/7/04 B.M.	D is delivery address different from ite	
PCB 2005-001		
Janis Rosauer		
Baravia, Illinois Residents Opposed to Siting of Waste		
Transfer Station	3. Service Type	
1301 Violet Lane	Certified Mail Express Ma	ail eipt for Merchandise
Batavia, IL 60510	☐ Insured Mail ☐ C.O.D.	The state of the s
	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number Transfer from senice labell 7004 1160 0005	/126 2002	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540