

ORIGINAL

RECEIVED
CLERK'S OFFICE

NOV 29 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: 11/18/04 B.M. ✓
PCB 2005-081
Kathryn and Brian Bradley
RR #1, Box 69
Timewell, IL 62375

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Kathryn Bradley 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 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 0750 0004 3960 1833