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STATE OF ILLINOIS
Pollution Control Board

ORIGINAL

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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Missy Smith</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to: 3/3/05 B.M. PCB 2005-008 John Ustich Village of Capron 118 4th Street Capron, IL 61012</p>	<p>B. Received by (Printed Name) <i>Missy Smith</i> C. Date of Delivery <i>3-11-05</i></p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <i>PO BOX 314 Capron IL 61012-0314</i></p>
<p>PS Form 3811, February 2004</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p style="text-align: right;">02595-02-M-1540</p>

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<p>1. Article Addressed to: 3/3/05 B.M. PCB 2005-008 Robert C. Pottinger Barrick, Switzer, Long, Balsley & Van Evera P.O. Box 17109 Rockford, IL 61110-7109</p>	<p>B. Received by (Printed Name) <i>TOM COBLENTZ</i> C. Date of Delivery <i>3-10-05</i></p>
<p>2. Article Number (Transfer from service label) <i>7004 2890 0004 2296 1013</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
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