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STATE OF ILLINOIS Pollution Control Board

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent ■ Print your name and address on the reverse ☐ Addressee 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. D. Is delivery address different from item/1? 1. Article Addressed to: 4/21/05 B.M. If YES, enter delivery address below: PCB 2004-178 Ned Mandich H.B.M. Electochemical Company 1650 Ridge Road 3. Service Type Homewood, IL 60430 Certified Mail ☐ Express Mail Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

2. Article Number

(Transfer from service label)

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PS Form 3811, February 2004

Domestic Return Receipt

4. Restricted Delivery? (Extra Fee)

102595-02-M-1540

☐ Yes