ORIGINAL

PS Form 3811, February 2004

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STATE OF ILLINOIS Pollution Control Board

102595-02-M-1540

	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 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: 8/17/06 B.M. PCB 2006-054. Virgil Harbach, R.A. Webb Again nc.	A Standure Agent Agent Addressee Received by (Printed Name) C. Date of Delivery S. 2.4 - CL. D. Is delivery address different from Item 17 Yes If YES, enter delivery address below:
618 W. Van Buren BOS 457 Clinton, IL 61727-2183	3. Service Type To Certified Mall
	4. Restricted Delivery? (Extra Fee)
(Transfer from service label) 7005 1160 0002	
(Transfer from service label) 7005 1160 0002 PS Form 3811, February 2004 Domestic Ret	
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.	
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,	COMPLETE THIS SECTION ON DELIVERY A. Signature X. Agent Addresse B. Received by (Printed Name) C. Date of Deliver III Hattemer C. Date of Deliver

Domestic Return Receipt