

ORIGINAL

RECEIVED
CLERK'S OFFICE

MAR 05 2007

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: 2/15/07 B.M.
PCB 2006-188
Karam Toor
9520 W. Woelfel Road
Franklin, WI 53132

2. Article Number
(Transfer from service label) 7001 1140 0002 7469 0541

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Karam Toor* Agent
 Addressee
B. Received by (Printed Name) *Karam Toor* C. Date of Delivery *2/24/07*
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