

ORIGINAL

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: 3/15/07 B.M.
PCB 2006-079
Kevin A. Polo
207 North Macoupon
Gillespie, IL 62033

2. Article Number
(Transfer from service label) 7001 1140 0002 7469 0268

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
K. Pelecy Addressee

B. Received by (Printed Name) C. Date of Delivery
3-23-07

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

RECEIVED
CLERK'S OFFICE
MAR 26 2007
STATE OF ILLINOIS
Pollution Control Board