

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: 5/3/07 B.M.
 AC 2005-047
 Stacy Hess
 1965 W. Cruger Road
 Washington, IL 61571

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 X *Stacy Hess* Addressee

B. Received by (Printed Name) C. Date of Delivery
 Stacy Hess 5-15-07

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

2. Article Number
 (Transfer from service label) 7006 0100 0000 7374 7798

RECEIVED
CLERK'S OFFICE

MAY 17 2007

STATE OF ILLINOIS
Pollution Control Board

ORIGINAL