

ORIGINAL

RECEIVED
CLERK'S OFFICE

JUN 26 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: 6/7/07 B.M.
PCB 2004-213
Elizabeth S. Harvey
Swanson, Martin & Bell
One IBM Plaza
330 N. Wabash, Suite 3300
Chicago, IL 60611

COMPLETE THIS SECTION ON DELIVERY

A. Signature X J. Podlin		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) J. Podlin	C. Date of Delivery	
D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee)		<input type="checkbox"/> Yes

2. Article Number
(Transfer from service label) 7006 2760 0003 5423 6980