

RECEIVED
CLERK'S OFFICE

AUG 20 2007

STATE OF ILLINOIS
Pollution Control Board

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: 8/9/07 B.M.
PCB 1998-108
Charles F. Helsten
Hinshaw & Culbertson
100 Park Avenue
P.O. Box 1389
Rockford, IL 61105-1389

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
A. Bilodeau

B. Received by (Printed Name) C. Date of Delivery
A. Bilodeau AUG 16 2007

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 0810 0004 2225 6070

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540