

ORIGINAL

RECEIVED
CLERK'S OFFICE

DEC 20 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: 10/18/07 B.M.

AS 2007-002

Alison M. Nelson

Blackwell Sanders Peper Martin

LLP

720 Olive St., 24th Floor

St. Louis, MO 63101

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

12/26/07

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

26
2007

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 6445

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540