RECEIVED CLERK'S OFFICE

JAN 18 2008

STATE OF ILLINOIS Pollution Control Board

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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 malipiece, or on the front if space permits. 	A. Signeture X Y
1. Article Addressed to: 1/10/08 B.M.	If YES, enter delivery address below: U No
PCB 2008-025 Claire A. Manning Brown, Hay & Stephens LLP	
700 First Mercentile Bank Bldg. S 305 South Fifth & P.O. Box 2459	3. Service Type Control Express Mall Express Mall Registered Return Receipt for Merchandise Insured Mail C.O.D.
Springfield, IL 62705-2459	4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service label) 7006 0810 0004	4 2225 2164
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	