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STATE OF ILLINOIS Pollution Control Board

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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 mailpiece, or on the front if space permits.  1. Article Addressed to: 05/01/08 B.M. AC 2007-062 Claire A. Manning Brown, Hay & Stephens LLP	A. Signature
700 First Mercantile Bank Bldg. L 205 South Fifth St. P.O. Box 2459 Springfield, IL 62705-2459	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
Springrieru, 1L 02/03-2439	4. Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label) 7007 3020 000	0 4630 6118
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

Victoria management representation of the control o	· · · · · · · · · · · · · · · · · · ·
R: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
If Restricted Delivery is desired.  your name and address on the reverse at we can return the card to you.  In this card to the back of the mailpiece, the front if space permits.	A. Signature  X POULL POUL GRAPH  B. Beceived by (Printed Name)  C. Date of Deliver  55/08  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
outh Fifht St. Box 2459 gfield, IL 62705-2459	3. Service Type Certified Maii
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Number 7007 3020 0000	4630 6125
3811, February 2004 Domestic Return	Receipt 102595-02-M-154
r from service label) 7007 3020 0000	

		4. Hestricted Delivery? (Extra Fee)	
	Article Number     (Transfer from service label) 704	07 3020 0000 4630 6125	
	PS Form 3811, February 2004	Domestic Return Receipt	10259
SENDER:	COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
item 4 if Print you so that y Attach to or on the AC 200 John A	. & Kay E. Oldham 🔩	A. Signature  X. John J. M. G. Date of D.  D. Is delivery address different from Item 1? Yes  If YES, enter delivery address below:	ressee
639 Oskaloosa Road  Xenia, IL 62899		3. Service Type  3. Service Type  Express Mail  Registered	andise
		4. Restricted Delivery? (Extra Fee)	.,
2. Article N (Transfer	iumber from service label) 7007 3020 0	000 4630 6132	
PS Form 3	3811, February 2004 Domesi	tic Return Receipt 162595-02	1540