

RECEIVED  
CLERK'S OFFICE

ORIGINAL

MAY 08 2008

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: 5/1/08 B.M.  
PCB 2008-082  
Samuel Buctianan  
RR 1, Box 129A  
Lawrenceville, IL 62439

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Samuel Buctianan*  Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

5-8

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)

7007 3020 0000 4630 6200