

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

PEOPLE OF THE STATE OF ILLINOIS,)
LISA MADIGAN, Attorney General of)
the State of Illinois,)

Complainant,)

v.)

RUPE CONTRACTING, INC.,)
an Illinois corporation, and JOHN A. RUPE,)
individually and as owner and operator of)
Rupe Contracting, Inc.,)

Respondents.)

PCB 08-83

(Enforcement – Water)

NOTICE OF FILING

TO: See Attached Service List

(VIA ELECTRONIC FILING)

PLEASE TAKE NOTICE that on June 5, 2008, the Plaintiff, PEOPLE OF THE STATE OF ILLINOIS, filed before the Illinois Pollution Control Board its Proof of Service, a true and correct copy of which is attached and hereby served upon you.

PEOPLE OF THE STATE OF ILLINOIS,
by LISA MADIGAN, Attorney General
of the State of Illinois

BY:



ANDREW ARMSTRONG
Assistant Attorney General
Environmental Bureau
69 West Washington Street, Suite 1800
Chicago, Illinois 60602
(312) 814-0660

Date: June 5, 2008

THIS FILING IS SUBMITTED ON RECYCLED PAPER

SERVICE LIST

Rupe Contracting, Inc.
John A. Rupe, President and Registered Agent
451 State Route 251
Rutland, Illinois 61358

John A. Rupe
451 State Route 251
Rutland, Illinois 61358

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD


PEOPLE OF THE STATE OF ILLINOIS,)
LISA MADIGAN, Attorney General of)
the State of Illinois,)
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RUPE CONTRACTING, INC.,)
an Illinois corporation, and JOHN A. RUPE,)
individually and as owner and operator of)
Rupe Contracting, Inc.,)
)
Respondents.)

PROOF OF SERVICE

COMES NOW the Complainant, People of the State of Illinois, and pursuant to the Board's procedural rules, provides proof of service of the Complaint. Attached are copies of the United States Post Office's Track and Confirm Delivery Receipt of Certified Mail as Proof of Service of Complaint on Respondents Rupe Contracting, Inc. and John A. Rupe.

PEOPLE OF THE STATE OF ILLINOIS,
by LISA MADIGAN, Attorney General
of the State of Illinois

BY:


ANDREW ARMSTRONG
Assistant Attorney General
Environmental Bureau
69 West Washington Street, Suite 1800
Chicago, Illinois 60602
(312) 814-0660

Date: June 5, 2008

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ 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.	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X	
1. Article Addressed to: Rupe Contracting, Inc. John A. Rupe, President and Registered Agent 3096 800th Road P.O. Box 201 Wenona, IL 61377	B. Received by (<i>Printed Name</i>)	C. Date of Delivery
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, August 2001	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7003 2260 0005 1979 7910	

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>[Handwritten Signature]</i></p>	
<p>1. Article Addressed to:</p> <p>Mr. John A. Rupe 451 State Route 251 Rutland, IL 61358</p>	<p>B. Received by (<i>Printed Name</i>)</p> <p><i>John Rupe</i></p>	<p>C. Date of Delivery</p> <p><i>3-5-8</i></p>
<p>2. Article Number (<i>Transfer from service label</i>)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	<p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>	
<p>7003 2260 0005 1979 7927</p>		



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Label/Receipt Number: 7003 2260 0005 1979 7927
Status: Delivered

Your item was delivered at 10:14 AM on May 5, 2008 in RUTLAND, IL 61358.

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No FEAR Act EEO Data

FOIA



U.S. Mail
Priority Mail



United States
Postage

CERTIFICATE OF SERVICE

I, ANDREW ARMSTRONG, an Assistant Attorney General in this case, do certify that I caused to be served this 5th day of June, 2008, the foregoing Notice of Filing and Proof of Service upon the persons listed on said Notice by depositing same in an envelope, by first class postage prepaid, with the United States Postal Service at 69 West Washington Street, Chicago, Illinois, at or before the hour of 5:00 p.m.



ANDREW ARMSTRONG