

RECEIVED
CLERK'S OFFICE

OCT 08 2008

STATE OF ILLINOIS
Pollution Control Board

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 checked="" type="checkbox"/> <i>Michael Serna</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: 9/30/08 B.M. Attn: Southwest Bank, Veach Oil Company #2 Carlyle Plaza Drive Belleville, IL 62221</p> <p><i>PS 08-97</i></p>	<p>B. Received by (<i>Printed Name</i>) <i>Steve Serna</i></p>	<p>C. Date of Delivery <i>10-6-08</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 <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input 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>2. Article Number (<i>Transfer from service label</i>) 7007 3020 0000 4631 0023</p>		

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540