



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

Lisa Madigan
ATTORNEY GENERAL

August 20, 2009

RECEIVED
CLERK'S OFFICE
AUG 24 2009
STATE OF ILLINOIS
Pollution Control Board

John Therriault, Assistant Clerk
Illinois Pollution Control Board
James R. Thompson Center
Suite 11-500
100 West Randolph
Chicago, Illinois 60601

ORIGINAL

Re: *People of the State of Illinois v. Waste Hauling Landfill, Inc., et al.*
PCB No. 10-9

Dear Mr. Therriault:

Pursuant to Section 103.123 of the Procedural Rules of the Illinois Pollution Control Board, the enclosed eleven executed certified mail receipts returned to date are filed with the Board as proof of service of the Notice and Complaint filed with the Board.

Thank you for your cooperation and consideration.

Sincerely,

A handwritten signature in cursive script that reads "Peggy J. Kingen".

Peggy J. Kingen
Environmental Bureau
Adm. Secretary
500 South Second Street
Springfield, Illinois 62706

Enclosures

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:

Caterpillar, Inc.
 c/o C T Corp. System
 208 S. LaSalle, Ste 814
 Chicago, IL 60604

2. Article Number 7004 2890 0000 2488 6257

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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 AUG 3 2009

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

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:

A.E. Staley Manufacturing Co.
 c/o CT Corp. System
 208 S. LaSalle St, Ste 814
 Chicago, IL 60604

2. Article Number 7005 1820 0008 2243 2307

*(Transfer from service label)***COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

 No

RECEIVED
 1 AUG 3 2009
 CT SOP DEPT

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

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:

Borden Chemical Co.
 c/o Prentice Hall Corp.
 33 North LaSalle St.
 Chicago, IL 60602

2. Article Number

(Transfer from service label)

7005 1820 0008 2243 2123

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

C. Herriot

 Agent Addressee

B. Received by (Printed Name)

C. Herriot

C. Date of Delivery

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

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:

Archer Daniels Midland
 c/o CT Corporation System
 208 S. LaSalle St., Ste 814
 Chicago, IL 60604

2. Article Number 7005 1820 0008 2243 2253
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

-
- Agent
-
-
- Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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 AUG 3 2009
 CT SOH DEPT

3. Service Type

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- Certified Mail
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- Registered
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- Insured Mail
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- Express Mail
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- Return Receipt for Merchandise
-
-
- C.O.D.

4. Restricted Delivery? (*Extra Fee*)

-
- Yes

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:

Bridgestone Firestone, Inc.
 c/o CT Corporation System
 208 S. LaSalle St. Ste 814
 Chicago, IL 60604

2. Article Number 7004 2890 0000 2488 6233
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

AUG 3 2009

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

CT SOP DEPT

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:

Combe Laboratories, Inc.
 c/o C T Corporation System
 208 S. LaSalle, Ste 814
 Chicago, IL 60604

2. Article Number 7004 2890 0000 2488 6264
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below No

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AUG 3 2009

CT SOP DEPT

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Aramark Uniform Services, Inc.
 c/o CT Croproation System
 208 S. LaSalle St., Ste 814
 Chicago, IL 60604

2. Article Number 7005 1820 0008 2243 2277
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

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 APR 3 2009
 CT SOP DEPT

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:

Trinity Rail Group, Inc.
 c/o CT Corporation System
 208 S. LaSalle St., Ste 814
 Chicago, IL 60604

2. Article Number 7003 3110 0000 3539 5877

*(Transfer from service label)***COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

-
- Agent
-
-
- Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

RECEIVED
 AUG 3 2009
 CT SOP DEPT

3. Service Type

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- Certified Mail
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- Express Mail
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- Registered
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- Return Receipt for Merchandise
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-
- Insured Mail
-
- C.O.D.

4. Restricted Delivery? (*Extra Fee*) Yes

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

P & H Manufacturing, Inc.
 604 S. Lodge
 P.O. Box 549
 Shelbyville, IL 62565

2. Article Number 7003 3110 0000 3539 5884

*(Transfer from service label)***COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

11.30.09

D. Is delivery address different from item 1? YesIf 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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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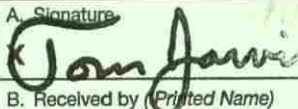
1. Article Addressed to:

Bell Sports, Inc.
 c/o Ill Corporation Service
 801 Adlai Stevenson Dr.
 Sprngfield, IL 62703

2. Article Number 7005 1820 0008 2243 2291
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature


 Agent AddresseeB. Received by (*Printed Name*)

Tom Jarvis

C. Date of Delivery

JUL 31 2004

D. Is delivery address different from item 1? YesIf 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

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- 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:

Climate Control, Inc.
 c/o Charles A. Demirjian, RA.
 225 N. Water St.
 Decatur, IL 62523

2. Article Number 7004 2890 0000 2488 6240

*(Transfer from service label)***COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Mari Curry* Agent AddresseeB. Received by (*Printed Name*)*Mari Curry*

C. Date of Delivery

*8/4/09*D. Is delivery address different from item 1? YesIf 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