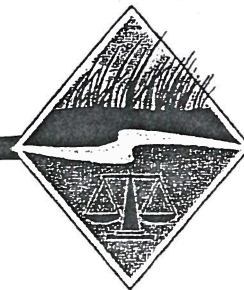


ILLINOIS POLLUTION CONTROL BOARD



Date _____

Number of pages including cover sheet _____

TO:

FROM:

Phone _____

Fax Phone _____

CC: _____

REMARKS:

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 checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: 1/19/17 B.M. PCB 2015-189 Greg Wannier Sierra Club 2101 Webster Street Suite 1300 Oakland, CA 94612		B. Received by (Printed Name) Anthony Harrison C. Date of Delivery	
		D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7014 0510 0001 5481 0658	
PS Form 3811, July 2013		Domestic Return Receipt	

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