

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: 4/12/17

PCB 2016-022
John P. Antonopoulos
Antonopoulos & Virtel, PC
15419 127th Street
Suite 100
Lemont, IL 60439

RECEIVED
CLERK'S OFFICE
APR 21 2017
STATE OF ILLINOIS
Pollution Control Board

2. Article Number

(Transfer from service label)

7014 0510 0001 5481 1143

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Antonopoulos*

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/12/17

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

3. Service Type

- Certified Mail®
- Registered
- Insured Mail
- Priority Mail Express™
- Return Receipt for Merchandise
- Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt