

ORIGINAL

RECEIVED
CLERK'S OFFICE

JUN 22 2006

STATE OF ILLINOIS
Pollution Control

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 Address: 6/15/06 B.M.
PCB 2005-180
Peter C. Swan
Emalfarm, Swan & Bain
440 Central Avenue
Highland Park, IL 60035

COMPLETE THIS SECTION ON DELIVERY:

A. Signature

x Mel Kulik

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-21-06

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

2. Article Number

(Transfer from service label) 7005 1160 0002 2067 9484

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PCB 05-180