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STATE OF ILLINOIS
Pollution Control Board

OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

Lisa Madigan
ATTORNEY GENERAL

July 28, 2006

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STATE OF ILLINOIS
Pollution Control Board

Ms. Dorothy Gunn, Clerk
Illinois Pollution Control Board
11th Floor, James R. Thompson Center
100 West Randolph Street
Chicago, Illinois 60601

Re: People of the State of Illinois v. Kurt Carlson
PCB 07-1

Dear Ms. Gunn:

Attached hereto is the certified mail return receipt evidencing service upon the Respondent in the above-referenced matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "VANESSA A. VAIL", is written over a horizontal line.

VANESSA A. VAIL
Assistant Attorney General
Environmental Bureau
188 W. Randolph St., 20th Fl.
Chicago, Illinois 60601
(312) 814-5361
vvail@atg.state.il.us

Attachment



BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

PEOPLE OF THE STATE OF ILLINOIS,)
)
 Complainant,)
)
 v.)
)
 KURT CARLSON,)
 an Illinois resident,)
)
 Respondent.)

PCB No. 07-1
 (Enforcement - Water)

PROOF OF SERVICE

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"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery TONGY FITALLIN 7-12-06</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>1. Article Addressed to:</p> <p>Kurt Carlson 7125 Windsor Lake Parkway Loves Park, IL 61111</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p align="center">7004 1160 0005 7670 4954</p>

PS Form 3811, February 2004

Domestic Return Receipt

102596-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10
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• Sender: Please print your name, address, and ZIP+4 in this box •

Vanessa Vail
Assistant Attorney General
Environmental Bureau
188 West Randolph Street, 20th Floor
Chicago, IL 60601