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STATE OF ILLINOIS

STATE OF ILLINOIS
Pollution Control Board

Lisa Madigan
ATTORNEY GENERAL

November 6, 2006

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

Re: *People of the State of Illinois v. Lake Arlann Drainage Dist., et al.*
PCB No. 07-32

Dear Ms. Gunn:

Pursuant to section 103.123 of the Procedural Rules of the Illinois Pollution Control Board, the enclosed executed certified mail receipt is 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 black ink that reads "Michael D. Mankowski".

Michael D. Mankowski
Environmental Bureau
Assistant Attorney General
500 South Second Street
Springfield, Illinois 62706

MDM/pp
Enclosure

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>Donella Guidotti</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Donella Guidotti</i> C. Date of Delivery <i>10/28/06</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
1. Article Addressed to: Mr. Spike Guidotti, Chairman Lake Arlann Drainage Dist. 3 Beachcomber Place Pekin, IL 61554		3. Service Type <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.	
2. Article Number 7000 0520 0012 5364 5855 (Transfer from service label)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

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1. Article Addressed to: Cochran & Wilken, Inc. c/o Edward Gower 400 S. 9th St. #200 Springfield, IL 62701		3. Service Type <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.	
2. Article Number 7000 0520 0012 5364 5831 (Transfer from service label)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

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1. Article Addressed to: Southwind Const. Corp. c/o Dirck H. Stahl Ziemer, Stayman, etc. 20 N.W. 1st, 9th Fl PO Box 916 Evansville, IN 47706-9016		3. Service Type <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.	
2. Article Number 7000 0520 0012 5364 5824 (Transfer from service label)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	