

ORIGINAL

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: 3/1/07 B.M.
PCB 2000-104
Jeffery W. Tock
Harrington & Tock
201 W. Springfield Avenue
Suite 601
P.O. Box 1550
Champaign, IL 61824-1550

2. Article
(Transit)

PS Form 3849, January 2002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x *V. Barton* ☒ Agent ☐ Addressee

B. Received by (Printed Name)
V. BARTON

C. Date of Delivery
3-14-07

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.

☐ Yes

2595-02-M-154

RECEIVED
CLERK'S OFFICE

MAR 20 2007

STATE OF ILLINOIS
Pollution Control Board