

ORIGINAL

RECEIVED  
CLERK'S OFFICE

MAR 27 2007

STATE OF ILLINOIS  
Pollution Control Board

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: 3/15/07 B.M.  
PCB 2005-217  
Ken Blouin  
6446 Lakeway Drive  
Monee, IL 60449

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent  
 *Ken Blouin*  Addressee

B. Received by (Printed Name)  Date of Delivery  
*Ken Blouin* 3/23/07

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

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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) 7001 1140 00002 7469 0381

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154