

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: 3/15/07 B.M.
 AC 2007-033
 Perry D. Winebrinner
 1010 Pulaski Street
 Lincoln, IL 62656-3136

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Perry Winebrinner Addressee

B. Received by (Printed Name) Agent
Perry Winebrinner Addressee

C. Date of Delivery *3/24/07*

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.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label) 7001 1140 0002 7469 0213

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

RECEIVED
 CLERK'S OFFICE
 MAR 29 2007
 STATE OF ILLINOIS
 Pollution Control Board

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 CLERK'S OFFICE
 MAR 29 2007
 STATE OF ILLINOIS
 Pollution Control Board