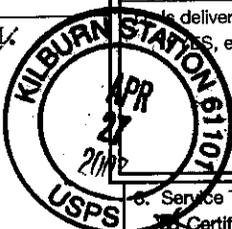


SENDER: COMPLETE THIS SECTION

- 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: 4/19/07 B.M.
 AC 2005-040
 Peter DeBruyne
 Peter DeBruyne, P.C.
 838 North Main Street
 Rockford, IL 61103



COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Laura Hargis Addressee

B. Received by (Printed Name) C. Date of Delivery
 4/27/07

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

ORIGINAL

RECEIVED
CLERK'S OFFICE

MAY 01 2007

STATE OF ILLINOIS
Pollution Control Board

2. Article Number
 (Transfer from service label) 7001 1140 0002 7469 0411

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.

Article Addressed to: 4/19/07 B.M.
 C 2005-040
 Lewis B. Kaplan
 38 North Main Street
 P.O. Box 1254
 Rockford, IL 61105-1254

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Lewis B. Kaplan Addressee

B. Received by (Printed Name) C. Date of Delivery
 LEWIS B. KAPLAN APR 27 2007

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

Article Number
 (Transfer from service label) 7001 1140 0002 7469 0428

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.

Article Addressed to: 4/19/07 B.M.
 C 2005-040
 Kayne Klinger
 Northern Illinois Service Co.
 781 Sandy Hollow Road
 Rockford, IL 61109

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Steven J. Freeman Addressee

B. Received by (Printed Name) C. Date of Delivery
 Steven J. Freeman 4/27/07

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

Article Number
 (Transfer from service label) 7001 1140 0002 7469 0404