

**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.  
 PCB 2007-098  
 Roy Wiegand  
 2254 County Road 1100 N.  
 Secor, IL 61771

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Roy Wiegand*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Roy Wiegand* 4/28/07

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) 7006 0100 0000 7374 7750

ORIGINAL

**RECEIVED**  
CLERK'S OFFICE

MAY 02 2007

STATE OF ILLINOIS  
Pollution Control Board