

ORIGINAL

RECEIVED
CLERK'S OFFICE

JUN 23 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: 6/7/07 B.M.
 PCB 2007-017
 Tom Halat
 Tom's Vegetable Market
 10214 Algonquin Road
 Huntley, IL 60142

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Elizabeth Halat
 B. Received by (Printed Name) Date of Delivery
Elizabeth Halat *6/23/07*
 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) 7007 0220 0003 0236 3883
 PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540