

Electronic Filing - Received, Clerk's Office, May 29, 2008

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

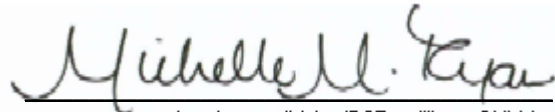
ILLINOIS ENVIRONMENTAL)
PROTECTION AGENCY,)
)
Complainant,) AC 08-26
)
v.) (IEPA No. 29-08-AC)
)
EDWARD W. FISHER, RHONDA L.)
FISHER and DEM/EX GROUP INC.,)
)
Respondents.)

NOTICE OF FILING

To: Edward W. Fisher & Rhonda L. Fisher DEM/EX Group, Inc.
7841 Warner Road 805 South Adams Street
Manito, IL 61546 Manito, IL 61546-9300

PLEASE TAKE NOTICE that on this date I electronically filed with the Clerk of the
Pollution Control Board of the State of Illinois the following instrument(s) entitled CERTIFIED
MAIL RECEIPT.

Respectfully Submitted,



e-signature valid for IPCB e-filings ONLY

Michelle M. Ryan
Assistant Counsel

Illinois Environmental Protection Agency
1021 North Grand Avenue East, P.O. Box 19276
Springfield, Illinois 62794-9276
(217) 782-5544

Dated: May 13, 2008

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(217) 782-9817
TDD: (217) 782-9143

May 29, 2008

John Therriault, Acting Clerk
Illinois Pollution Control Board
James R. Thompson Center
100 West Randolph Street, Suite 11-500
Chicago, Illinois 60601

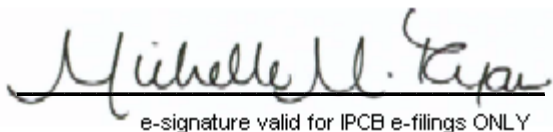
Re: Illinois Environmental Protection Agency v. Edward W. Fisher *et al.*
AC 08-26
1250305011—Mason County

Dear Clerk Therriault:

Please be advised that service was had on Respondents, Edward W. Fisher, Rhonda L. Fisher and DEM/EX Group, Inc., on March 20, 2008. In order to avoid default, a Petition for Review was required to be filed with the Illinois Pollution Control Board on or before April 24, 2008.

Copies of the returned Certified Mail Receipts are attached hereto.

Sincerely,



Michelle M. Ryan

e-signature valid for IPCB e-filings ONLY

Michelle M. Ryan
Assistant Counsel

Enclosure

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>DEM/EX Group, Inc. 805 S. Adams Street Manito, IL 61546-9300</p> <p>29-08</p>	<p>B. Received by (Printed Name) C. Date of Delivery Rhonda Perkins 3-20-08</p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	
<p>7004 2510 0001 8619 2118</p>	
<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>Edward W. Fisher & Rhonda L Fisher 7841 Warner Road Manito, IL 61546</p> <p>29-08</p>	<p>B. Received by (Printed Name) C. Date of Delivery EWF 3-20-08</p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	
<p>7004 2510 0001 8619 2125</p>	
<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

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PROOF OF SERVICE

I hereby certify that I did on the 29th day of May, 2008, send by U.S. Mail with postage thereon fully prepaid, by depositing in a United States Post Office Box a true and correct copy of the following instrument(s) entitled CERTIFIED MAIL RECEIPT

To: Edward W. Fisher & Rhonda L. Fisher	DEM/EX Group, Inc.
7841 Warner Road	805 South Adams Street
Manito, IL 61546	Manito, IL 61546-9300

and an electronic copy of the same foregoing instrument on the same date via electronic filing

To: John Therriault, Acting Clerk
Pollution Control Board
James R. Thompson Center
100 West Randolph Street, Suite 11-500
Chicago, Illinois 60601



e-signature valid for IPCB e-filings ONLY

Michelle M. Ryan
Assistant Counsel

Illinois Environmental Protection Agency
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