

**RECEIVED**  
CLERK'S OFFICE

AUG 18 2008

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: 8/7/08 B.M.  
PCB 2005-035  
Stephen F. Hedinger  
Hedinger Law Firm  
2601 South Fifth Street  
Springfield, IL 62703

2. Article Number  
(Transfer from service label) 7007 3020 0000 4630 6866

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*[Handwritten Signature]*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*[Handwritten Name]* 8/19/08

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



Domestic Return Receipt

102595-02-M-1640