

ORIGINAL

RECEIVED
CLERK'S OFFICE

AUG 21 2008

STATE OF ILLINOIS
Pollution Control Board

| 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 <i>x B Brozowski</i></p> <p>B. Received by (Printed Name) <i>BROZOWSKI</i></p> <p>C. Date of Delivery <i>AUG 18 2008</i></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>1. Article Addressed to: <i>8/7/08 B.M.</i> PCB 2005-035 Charles F. Helsten Hinshaw & Culbertson 400 South Ninth Street Suite 200 Springfield, IL 62701</p> | <p>3. Service Type <input checked="" 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> |
| <p>2. Article Number (Transfer from service label) <i>7007 3020 0000 4630 6835</i></p> | |