

ORIGINAL

RECEIVED  
CLERK'S OFFICE

MAY 16 2005

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: 5/5/05 B.M.  
PCB 2005-179  
Arthur Keller  
7031 N. 1900 Street  
Willow Hill, IL 62480

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
x Arthur Keller ☒ Agent ☐ Addressee  
B. Received by (Printed Name) Arthur Keller C. Date of Delivery 5.13.5  
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) 7004 2890 0004 2307 0912

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540