

ORIGINAL

RECEIVED  
CLERK'S OFFICE

JUN 13 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: 6/2/05 B.M.  
AC 2005-064  
Willie Doucher  
1207 Ellis Street  
Urbana, IL 61801

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
*W. White*  
B. Received by (Printed Name) C. Date of Delivery  
*W. WHITE* *6/10/05*  
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 0981

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540