

RECEIVED  
CLERK'S OFFICE

MAR 29 2005

STATE OF ILLINOIS  
Pollution Control Board

RECEIVED  
CLERK'S OFFICE

**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: 3/17/05 B.M.  
AC 2005-048  
Doug Ticer  
123 U.S. Route 51 N  
DuQuoin, IL 62832

2. Article Number  
(Transfer from service label) 7004 2890 0004 2296 1075

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
Mary Ticer  
B. Received by (Printed Name) C. Date of Delivery  
Mary Ticer 3-28-05  
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

**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: 3/17/05 B.M.  
AC 2005-048  
Gary Pierson  
Southern Illinois Regional  
Landfill  
1540 Landfill Road  
DeSoto, IL 62924

2. Article Number  
(Transfer from service label) 7004 2890 0004 2296 1068

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
Wendy Church  
B. Received by (Printed Name) C. Date of Delivery  
Wendy Church 3-23-05  
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

**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: 3/17/05 B.M.  
AC 2005-048  
George Browning  
112 California  
Carterville, IL 62918

2. Article Number  
(Transfer from service label) 7004 2890 0004 2296 1082

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
George Browning  
B. Received by (Printed Name) C. Date of Delivery  
George Browning 3-28-05  
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