RECEIVED CLERK'S OFFICE

FEB 1 4 2005

STATE OF ILLINOIS Pollution Control Board



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature Agent Addressee B. Received by Printed Name) C. Date of Delivery
1. Article Addressed to: 2/3/05 B.M.	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
PCB 2004-079	
G. Allen Andreas	
Archer Daniels Midland Company	
4666 Faries Parkway	3. Service Type
P.O. Box 1470	Service type Certified Mail Express Mail
Decatur, IL 62526	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7004 0750 0004 3960 2847	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature Agent Addressee B. Beceived by (Printed Name) C. Date of Delivery Addressee A Section 1 2-10-05
1. Article Addressed to: 2/3/05 B.M.	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
PCB 2004-079 V	
Bonita and Richard Saxbury	
P.O. Box 3	
Hull, IL 62343	2 Capita Tina
	3. Service Type ☐ Certified Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
8 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7004 2890 0004 2296 0719	
PS Form 3811 February 2004 Democilis Deturn Possint 100505 00 M 4540	