

**RECEIVED**  
CLERK'S OFFICE

**AUG 30 2004**

**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:

PCB 2004-098  
Debra A. Slater  
Weiss Berzowski Brady  
700 North Water Street  
Milwaukee, WI 53018-1815

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Shawn Farrell*  Agent  
 Addressee

B. Received by (Printed Name)

*Shawn Farrell*

C. Date of Delivery

*8/26*

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

7004 1160 0005 4126 3066

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540