

NOV 12 2004

STATE OF ILLINOIS
Pollution Control Board

ORIGINAL

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: 11/4/04 B.M.

AC 2005-004
W. Ed Kuersten
G.T. & L., Inc.
22341 Sherman Road
Steger, IL 60475

2. Article Number
(Transfer from service label) 7004 1160 0005 4126 0607

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Diane M. Dardson Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
Diane M. Dardson 11-10-04

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: 11/4/04 B.M.

AC 2005-004
Registered Agent, G.T.&L, Inc.
Donald P. Bailey
10729 W. 159th Street
Orland Park, IL 60467

2. Article Number
(Transfer from service label) 7004 1160 0005 4126 0614

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Karen Nau Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
Karen Nau 11-10-04

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