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APR 28 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: 4/21/05 B.M.
PCB 2005-055, 058, 059
Percy L. Angelo
Mayer, Brown, Rowe & Maw, LLP
190 S. LaSalle Street
Chicago, IL 60603

2. Article Number
(Transfer from service label) 7004 2890 0004 2296 4861

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

ORIGINAL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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1. Article Addressed to: 4/21/05 B.M.
PCB 2005-055, 058, 059
Russell R. Eggert
Mayer, Brown, Rowe & Maw, LLP
190 S. LaSalle Street
Chicago, IL 60603

2. Article Number
(Transfer from service label) 7004 2890 0004 2296 4878

Domestic Return Receipt

102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

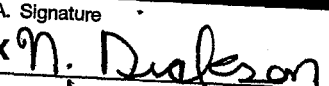
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1. Article Addressed to: 4/21/05 B.M.
PCB 2005-055, 058, 059
Albert F. Ettinger
Environmental Law & Policy Center
35 E. Wacker Drive, Ste. 1300
Chicago, IL 60601

2. Article Number
(Transfer from service label) 7004 2890 0004 2296 4885

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

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1. Article Addressed to: 4/21/05 B.M.
 PCB 2005-055, 058, 059
 William D. Seith
 Total Environmental Solutions
 631 E. Butterfield Road
 Suite 315
 Lombard, IL 60148

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Carol J. Seith

B. Received by (Printed Name) C. Date of Delivery
 CAROL J. SEITH 4-26

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
 (Transfer from service label) 7004 2890 0004 2296 4892

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- 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: 4/21/05
 PCB 2005-055, 058, 059
 Jay J. Glenn
 2275 Half Day Road, Suite 350
 Bannockburn, IL 60015

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
J. J. Glenn

B. Received by (Printed Name) C. Date of Delivery
 J. J. Glenn 4/21/05

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 2296 4939

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 4/21/05 B.M.
 PCB 2005-055, 058, 059
 Kevin G. Desharnais
 Mayer, Brown, Rowe & Maw, LLP
 190 S. LaSalle Street
 Chicago, IL 60603

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Kevin G. Desharnais

B. Received by (Printed Name) C. Date of Delivery
 Kevin G. Desharnais 4/21/05

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 2296 4854

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-154