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DEC 02 2005

STATE OF ILLINOIS
Pollution Control Board

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY			
<ul style="list-style-type: none">■ 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. <p>1. Article Addressed to: 11/17/05 B.M. AC 2006-012 Bonnie Harris Beardstown Truck Wash, LLC 8969 Arenzville Road Beardstown, IL 62618</p>	<p>A. Signature <i>Bonnie Harris</i> <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <table border="1"><tr><td data-bbox="917 739 1252 806">B. Received by (Printed Name) <i>Bonnie Harris</i></td><td data-bbox="1252 739 1449 806">C. Date of Delivery <i>11-30</i></td></tr></table> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>		B. Received by (Printed Name) <i>Bonnie Harris</i>	C. Date of Delivery <i>11-30</i>
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2. Article Number (Transfer from service label)	7005 1160 0002 2443 1156			