

ORIGINAL

RECEIVED
CLERK'S OFFICE

AUG 03 2006

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: 7/20/06 B.M.
 AC 2006-047
 Landfill, LLC
 P.O. Box 657
 622 N. Granger
 Harrisburg, IL 62946

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 X *[Signature]*

B. Received by (Printed Name)

C. Date of Delivery
7-28-06

D. Is delivery address different from item 1?
 If YES, enter delivery address below: Yes 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)

7005 1160 0002 2067 9767

Domestic Return Receipt

PS Form 3811, February 2004

102595-02-M-1540