

ORIGINAL

RECEIVED
CLERK'S OFFICE

MAR 14 2007

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: 3/1/07 B.M.

PCB 2000-104
Charles M. Gering
Foley & Lardner
321 North Clark Street
Suite 2800
Chicago, IL 60610

2. Article Number
(Transfer from service label)

7001 1140 0002 7469 0138

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
X *R. SABA* ☐ Address
- B. Received by (Printed Name) *R. SABA* C. Date of Delivery *3/13/07*
- 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

Domestic Return Receipt

102595-02-M-15