

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: 2/15/07 jt
PCB 2005-049
Morton F. Dorothy
104 W. University
SW Suite
Urbana, IL 61801

2. Article Number
(Transfer from service label)

7002 0860 0004 9604

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☒ Addressee

B. Received by (Printed Name)

M. Downey

C. Date of Delivery

4/7/07

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☐ Certified Mail

☐ Express Mail

☐ Registered Mail

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery (Extra Fee)

☐ Yes

Domestic Return Receipt

102595-02-M-154

RECEIVED
CLERK'S OFFICE

APR 09 2007

STATE OF ILLINOIS
Pollution Control Board