

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: 4/19/07 B.M.
 AC 2007-044
 Larry Tomlinson
 107 East Water Street
 Washburn, IL 61570

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Larry Tomlinson* Agent
 Addressee

B. Received by (Printed Name) *Larry Tomlinson*

C. Date of Delivery *4-30-07*

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

P O Box 103

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) 7001 1140 0002 7489 2761

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RECEIVED
CLERK'S OFFICE

MAY 03 2007

STATE OF ILLINOIS
Pollution Control Board

ORIGINAL