

ORIGINAL

RECEIVED  
CLERK'S OFFICE

JUL 02 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: 6/21/07 B.M.

PCB 2002-214

Michael G. Rosenberg, Esq.

Metropolitan Water Reclamation  
District

100 E. Erie Street  
Chicago, IL 60611

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *H. Proctor*  Agent  
 Addressee

B. Received by (Printed Name) *H. Proctor* C. Date of Delivery

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

2. Article Number  
(Transfer from service label)

7007 0220 0003 0236 4170

102595-02-M-1540

PS Form 3811, February 2004

Domestic Return Receipt