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	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to: EPUEA/CERCLA/CAA - 07 - 2007 - 0003 Mr. Randy Simmons</li> </ul>	A. Signature       Agent         A. Signature       Address         M. Ling       Address         B. Beceived by (Printed Name)       C. Date of Del         Julic       D. Munch         D. Is delivery address different from item 1?       Yes         If YES, enter delivery address below:       No
	Schwan's Global Supply Chain, Inc. 3019 Scanlan Avenue Salina, Kansas 67401	3. Service Type       Scentified Mail       Registered       Insured Mail       C.O.D.
	2. Article Number (Transfer from se 7004251000)	4. Restricted Delivery? (Extra Fee)     □ Yes       06     9719     9088
	PS Form 3811, February 2004 Domestic Re	etum Receipt 102595-02-N

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