

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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OFFICIAL USE

Postage \$	9/26/13 Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Mick Cheff, President
Jore Corporation
 34837 Innovation Drive
 Ronan, MT 59864
DOCKET NO.: RCRA-08-2013-0002

PS Form 3800, August 2006 See Reverse for Instructions

7008 3230 0003 0726 3048

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Allen Dodson</i></p> <p>C. Date of Delivery <i>9-27-13</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>Mick Cheff, President Jore Corporation 34837 Innovation Drive Ronan, MT 59864 DOCKET NO.: RCRA-08-2013-0001</p> </div> <p>SEP 25 2013 <i>I</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Tracking Number (Track Mail)</p> <p style="font-size: 1.2em; font-weight: bold;">7008 3230 0003 0726 3260</p> <p style="text-align: right; font-size: 1.5em; font-weight: bold;">AD</p>	