

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:



The Honorable David T. Hanwerk
 Mayor of Orrville, Ohio
 Orrville Municipal Building
 207 North Main Street
 Orrville, Ohio 44667

CAA-05-2015-0057

CAF

2. Article Number
(Transfer from service label)

7011 1150 0000 2640 4833

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

9-19-15

D. Is delivery address different from item 1? If YES, enter delivery address below.

Yes

No

SEP 24 2015

U.S. ENVIRONMENTAL PROTECTION AGENCY

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)


Yes

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •


 LaDawn Whitehead
 Regional Hearing Clerk
 U.S. EPA - Region 5
 77 West Jackson Blvd (E-19J)
 Chicago, IL 60604-3590

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