

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:

National Frozen Foods Corporation
Pat Souter, General Manager
188 Sturdevant Rd.
Chehalis, WA 98532-8720

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *Pat Souter* Addressee

B. Received by *Pat Souter* C. Date of Delivery *2/14*

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

**RECEIVED
HEARINGS CLERK
EPA -- REGION 10**

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7010 1060 0002 0288 0955

CAA-10-11-0039