


**SENDER: COMPLETE THIS SECTION** **COMPLETE THIS SECTION ON DELIVERY**

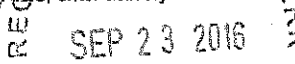
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece.

A. Signature  Agent  
 Address  
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery  
*[Signature]*

1.   
 Brad Geyman, Plant Manager  
 Green Plains Holdings II, LLC  
 7025 Silberhorn Highway  
 Blissfield, Michigan 49228

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

  
 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

CAA-05-2016-0041 (ESA)

2. Article Number  
 (transfer from service label) *7011 1150 0000 2640 6912*


UNITED STATES POSTAL SERVICE

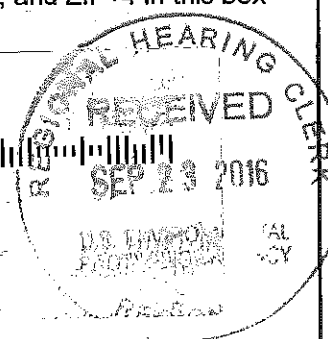
MI 430  
 20 SEP '16



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 - E19J  
 77 WEST JACKSON BLVD  
 CHICAGO, IL 60604



CAA-05-2016-0041