

SENDER: COMPLETE SECTION	COMPLETE THIS SECTION 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 type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>Ricky W. Aldsworth</i></p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p><i>Ricky W. Aldsworth</i></p>
<p>1. Article Addressed to:</p> <p><i>Dave McKercher</i> <i>Exide Technologies</i> <i>P.O. Box 250</i> <i>Frisco, TX 75034</i> <i>(AD) RCRA-06-2011-0966</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>3. Service Types</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><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 Number (Transfer from service label)</p>	<p><i>7001 0360 0003 6674 4799</i></p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

Attorney: Jay Przyborski

Case: Exide Technologies

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 2012 MAY 21 AM 10:40
 REGIONAL HEARING CLERK
 EPA REGION VI