

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:

**William T. Curran, Esquire**  
**CURRAN, HOLLENBECK & ORTON, SC**  
 111 Oak Street  
 Mauston, Wisconsin 53948-0142

*Answer*  
 CWA 05 2011 0008

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *Vicki A. Bay* B. Date of Delivery *10-6-11*  
 C. Signature *Vicki A. Bay*  Agent  Addressee  
 X  Registered Mail  Return Receipt for Merchandise  
 Insured Mail  C.O.D.  
 D. Is delivery address different from item 1?  Yes  No  
 Is delivery address below?  Yes  No

Express Mail  Registered Mail  Return Receipt for Merchandise  
 Insured Mail  C.O.D.  
 4. Restricted Delivery? (Extra Fee)  Yes  No

2. Article Number (Transfer from service label)

7001 0320 0006 0188 0017

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-142

RECEIVED  
 OCT 21 2011  
 REGIONAL HEARING CLERK  
 U.S. ENVIRONMENTAL  
 PROTECTION AGENCY

UNITED STATES POSTAL SERVICE

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

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

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

*CWA 05 2011 0008*

RECEIVED  
 OCT 21 2011  
 REGIONAL HEARING CLERK  
 U.S. ENVIRONMENTAL  
 PROTECTION AGENCY

