UNITED STATES POSTAL SERVICE

MINNEAPOLIS MN 554 23 MAY '16 PM 2 L

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

RECEIVED
REGIONAL HEARING CLERK
JUN - 1 2016
U.S. ENVIRONMENTAL PROTECTION AGENCY

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:

Mr. Jim Lambert
General Manager
POET Biorefining - Lake Crystal
19200 499th Avenue
Lake Crystal, MN 56055

CAA-05-2016-0024

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 5-23-16

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7011 1150 0000 2640 6752

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540