

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> <b>X</b> 	
1. Article Addressed to:  <div style="border: 1px solid black; padding: 5px; margin: 10px 0;">             David B. Van Slyke              Preti Flaherty Beliveau &amp; Pachios LLP              P.O. Box 9546              Portland, ME 04112-9546              Docket No. TSCA-01-2011-0037           </div>	B. Received by ( <i>Printed Name</i> ) 	C. Date of Delivery
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes		
<div style="border: 1px solid black; padding: 5px; text-align: center;">             7010 1670 0000 2319 2894           </div>		