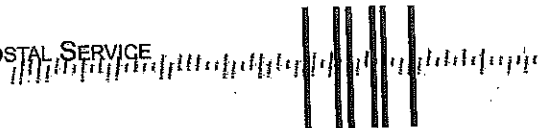


UNITED STATES POSTAL SERVICE



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

• Sender: Please print your name, address, and ZIP+4 in this box •

Regional Hearing Clerk (E-19J)
U.S. EPA
77 W. Jackson Blvd.
Chicago IL 60604

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. Gregory J. Bradley
Dow Microbial Control
1650 Joseph Dr.
100 Larkin Center, Office 117
Midland, Michigan 48674

FI 7RA-05-2013-0004

2. Article Number
(Transfer from service label)

7009 1680 0000 7641 3640

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
[Signature] Addressee

B. Received by (Printed Name) C. Date of Delivery
NO RECEIVED *3/7/13*

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

MAR 08 2013

REGIONAL HEARING CLERK

USEPA

3. Service Type **REGION 5**
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

102595-02-M-1540