

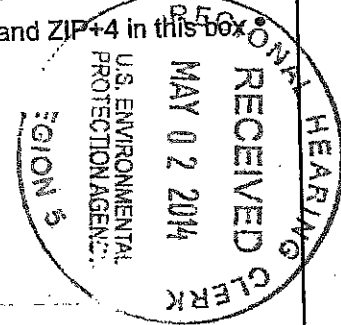
UNITED STATES POSTAL SERVICE



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

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

Greg Chomycia
U.S. EPA Region 5 (SC-5J)
77 West Jackson Boulevard
Chicago, Illinois 60604-3590



93600000

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON 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 checked="" type="checkbox"/> Agent <i>Tom Irwin</i> <input type="checkbox"/> Addressee</p>	
1. Article Addressed to:	<p>B. Received by (Printed Name) <i>TOM IRWIN</i> C. Date of Delivery <i>4-17-14</i></p>	
<p>Cyclone Grain Co Inc. Attn: Tom Irwin, President 4079 East 400 South Frankfort, Indiana 46041</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
2. Article Number (Transfer from service label)	<p>RECEIVED CLERK MAY 02 2014 <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D. <input type="checkbox"/> Yes</p>	
	<p>7009 1680 0000 7648 5814</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540