

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, Illinois 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. Clinton T. Anderson  
CTA Properties  
333 North Randall Road  
St. Charles, Illinois 60174

*TSCA-05-2012-0018*

2. Article Number  
(Transfer from service label)

7009 1680 0000 7667 8780

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*X Debbie Buckner*  Agent  Addressee

B. Received by (Printed Name) *Debbie Buckner* C. Date of Delivery *9/17/12*

D. Delivery address different from item 1?  Yes  No  
YES, enter delivery address below

**DELIVERED**  
SEP 17 2012

**REGIONAL HEARING CLERK**

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

4. Restricted Delivery? (Extra Fee)  Yes

Domestic Return Receipt

102595-02-M-1540