

Initial Reception 2-16-05

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:

Raymond Kastendieck
 (owner)
 Washington MO
 FRM Chem
 Judge Moran

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 *Kara C. Kastendieck Address

B. Received by (Printed Name) Date of Delivery
 Kara C. Kastendieck 2-22-05

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

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

4. Restricted Delivery? (Extra Fee) Yes

2. 7003 2260 0001 7572 0222

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-15

RECEIVED
U.S. E.P.A.

2005 MAR -2 AM 9:21

ENVIR. APPEALS BOARD.

233-0121