

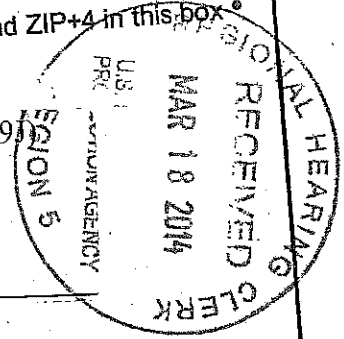
UNITED STATES POSTAL SERVICE



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-19)
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. Douglas McClain
Vice President
6480 Lewis Road
Olmsted Falls, Ohio 44138

2. Article Number
(Transfer from service label)

EPCRA-05-2012-0035

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Elizabeth A. Gentry Addressee

B. Received by (Printed Name) C. Date of Delivery
Elizabeth A. Gentry *3-15-14*

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

7009 1680 0000 7647 6225

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540