

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:
2011 JUN 22 AM 8:27
 Jacqueline Simmons, Esq.
 Baker & Daniels, LLP
 300 North Meridian Street, Suite 2700
 Indianapolis, Indiana 46204-1782

2. Article Number
 (Transfer from service label) **7009 1480 0000 17571 17946**

PS Form 3811, March 2001

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
X *Paula Grayson* Agent Address

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

CIRQUE CITY STATION
JUN 16 2011

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

4. Restricted Delivery? (Extra Fee) Yes

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 •

2011 JUN 22 AM 8:27
RECEIVED
U.S. EPA REGION 5
LEGAL HEARING CLERK

Chicago, IL 60601
 James Entzminger
 U.S. Env. Protection Agency
 CEPPS- Mail code SC-5J
 77 West Jackson Boulevard
 Chicago IL 60604

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CEPCLA 05-2011-0014
EPCRA-05-2011-0019
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