

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:

Joseph M. Kellmeyer, Attorney
 Thompson Coburn LLP
 One US Bank Plaza
 St. Louis, Missouri 63101

2. Article Number
 (transfer from service label)

7009 1680 0000 7648 3940

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

J. M. Thomas

- Agent
- Addressee

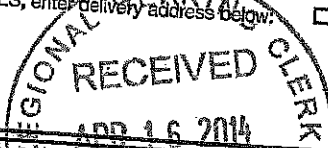
B. Received by (Printed Name)

J. M. Thomas

C. Date of Delivery

4/16/14

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



3. Service Type

- Certified Mail Registered Mail
- Registered Mail Insured Mail
- Insured Mail G.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 •

James Entzminger
 U.S. EPA
 CEPPS - Mail Code SC-5J
 77 West Jackson Blvd.
 Chicago, IL 60604

CEPPS 05-2014-0006
EPDPA-05-2014-0013
CAFC MM-05-2014-0002

