

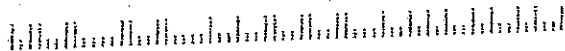
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

La Dawn Whitehead
Regional Hearing Clerk (E-19J)
U.S. EPA - Region 5
77 West Jackson Blvd
Chicago, IL 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. Lester Sykes
200 East 96th Street
Chicago, IL 60628**

Answer TSCA 05 20080013

2. Article Number

(Transfer from service label) 7001 0320 0006 1455 6305

COMPLETE THIS SECTION ON DELIVERY

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

[Signature] *12/19/12*

C. Signature

[Signature] Agent Addressee

D. Is delivery address different from letter? Yes

If Yes, enter delivery address below: No

RECEIVED
DEC 19 2012

3. Registered Mail Registered Mail Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes