

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. Joseph W. Spiers, IV
 Kelly's Septic Service, LLC
 4340 County RD-55
 Bellefontaine, OH 43311

2. Article Number
 (Transfer from service label)

7009 1680 0000 7672 3565

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 Lindsay Spiers MAY - 6 2013

C. Signature
 X Lindsay Spiers Agent Addressee

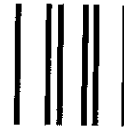
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

10090 SR 29W
 Co. Graff, OH 43318

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

RECEIVED
 MAY - 9 2013
 REGIONAL HEARING CLERK
 U.S. ENVIRONMENTAL
 PROTECTION AGENCY
 LaDawn WhiteHead, RHC, (E-19J)
 Office of Enf. & Comp. Assurance
 U.S. Env. Prot. Agency
 77 W. Jackson Blvd.
 Chicago, IL 60604

RECEIVED
 USEPA REGION 5
 MAY - 9 2013
 OFFICE OF ENFORCEMENT &
 COMPLIANCE ASSURANCE

9505 1680 0000 7672 3565
 CWA-05-2013-0007

Kelly's Septic
 Service
 Bellefontaine, OH