

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
Ms. Dessie Brumfield
D/B/A Brumfield Properties, LLC
5067 N 37th St
Milwaukee, Wisconsin 53209

ANSWER 4
TSCA 05 2010 0014

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 10/13/11

C. Signature
 X *Dessie Brumfield* Agent Addressee

D. Is delivery address different from item 1? Yes No
 Delivery address below

RECEIVED

OCT 13 2011

REGIONAL HEARING CLERK
U.S. ENVIRONMENTAL PROTECTION AGENCY

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

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7001 0320 0006 0188 0000

102595-01-M-1424

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

RECEIVED
OCT 13 2011
REGIONAL HEARING CLERK
U.S. ENVIRONMENTAL PROTECTION AGENCY

