

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:

Kimberly Seely, Attorney
 Goodstein Law Group
 501 S G Street
 Tacoma, WA 98405

2. Article Number
 (Transfer from service label)

7008 0150 0000 8075 7295

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
 RECEIVED

- Agent
- Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

5/27/10

D. Is delivery address different from item 1?

- Yes
- No

10 JUN 2 AM 8:37
 HEARINGS CLERK
 EPA -- REGION 10

3. Service Type

- Certified Mail
- Express Mail
- Registered
- Return Receipt for Merchandise
- Insured Mail
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- Yes