

Beacon Park Yard

NFDES 05-15

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Thomas Anderson, Counsel
 CSX Transportation, Inc.
 500 Water Street, J-150
 Jacksonville, FL 32202

7001 4468 6923

- 4b. Service Type
- Registered
 - Certified
 - Registered Mail
 - Insured
 - Signature Required
 - Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)
M. Hartzel

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Thank you for using Return Receipt Service.