

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. Robert Eichelberger
Operations Manager
Evergreen FS, Inc.
P.O. Box 1367, 402 N. Hershey Rd.
Bloomington, Illinois 61702

2. Article Number (Transfer from service label)
PS Form 3811, March 2001
SC-55 J. Entzinger

7001 0320 0005 8914 2251

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *Ben Wells* B. Date of Delivery *12/7/10*

C. Signature *[Signature]* Agent Addressee

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

3. Service Type: Registered Express Mail Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

RECEIVED
DEC 16 2010
REGIONAL HEARING CLERK
U.S. ENVIRONMENTAL PROTECTION AGENCY

U.S. Postal Service *SC-55*
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

J. Entzinger
CAROLA-05-2011-0002

7001 0320 0005 8914 2251

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.99

Sent To: Mr. Robert Eichelberger
Operations Manager
Evergreen FS, Inc.
P.O. Box 1367, 402 N. Hershey Rd.
Bloomington, Illinois 61702

PS Form 3800, Jan 2008 See Reverse for Instructions

RECEIVED
DEC 21 2010
STATION 1001