
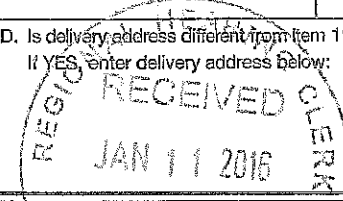



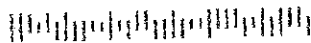
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Address B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:  Geoffrey M. Stolz General Operations Manager Essentra Porous Technologies 5301 S. Graham Road St. Charles, Michigan 48655  CAA-05-2016-0009 <i>CESA</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No  3. Service Type: ENVIRONMENTAL PROTECTION AGENCY <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> G.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label) <i>7011 1150 0000 2640 6431</i>	PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15

UNITED STATES POSTAL SERVICE

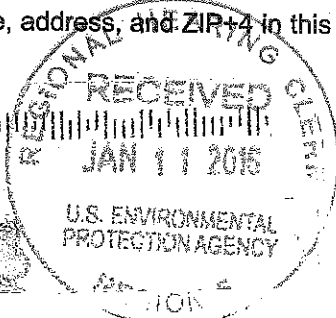


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 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •



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CAA-05-2016-0009 *CESA*