

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 Tyson
MDEQ
525 West Allegan Street
Lansing, MI 48933-1502

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery _____

C. Signature _____ Agent
 Addressee

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

RCRA-05-2007-0009

3. Service Type
 Certified Mail Express Mail
 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 1458 8818

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

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

RCRA-05-2007-0009

Postage	\$ 8.25
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 13.05

*Sanja
 Burka
 E-135*

9188 8818
 954T 1458
 9000 0006
 0220 0320
 7001 1002

Kimberly Tyson
 Street Apt. No. _____
MDEQ
525 West Allegan Street
Lansing, MI 48933-1502

PS Form 3800 January 2001

See Reverse for Instructions