

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  X <i>Rae Jean Bryant</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>RAE JEAN BRYANT</i></p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p><i>Travis Soule, President/Manager  Landmark Real Estate  management, Inc., et al.  PO Box 891  Lewiston, ME 04243</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No  If YES, enter delivery address below:</p>
<p>2. Article Number  (Transfer from service label)</p>	<p>3. Service Type  <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"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7009 0080 0000 2350 304</p>	<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>

UNITED STATES POSTAL SERVICE  
SO. MAINE P&DC 040  
01 OCT 2009 PM 1 T

First Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

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

*MHBS*

Judy Lao-Ruiz  
Acting Regional Hearing Clerk  
U.S. EPA, Region I  
One Congress Street, Suite 1100 (RAA)  
Boston, MA 02114-2023

023  
Jacket No. TSCA-01-2009-0106