

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:
Douglas A. Donnell
Mika Meyers Beckett +
Jones, PLC
900 Monroe Avenue, NW
Grand Rapids, MI
49503-1423

2. Article Number
(Transfer from service label)

7001 0320 0006 0191 4330

PS Form 3811, March 2001

COMPLETE THIS SECTION ON DELIVERY

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

[Signature] FEB 18 2010

C. Signature Agent
X *[Signature]* Addressee

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

RECEIVED
FEB 22 2010

REGIONAL HEARING CLERK

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

**USEPA
REGION 5**

4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt

102595-01-M-1424

RCRA-05-2008-0006