

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. Douglas Paulino
9-11 Orange St.
Hartford, CT 06106

Please file
with In At.
Douglas Paulino,
TSCA-01-2009-
0066, Thru
- Catherine Smith

COMPLETE THIS SECTION ON DELIVERY

A. Signature X *Douglas Paulino* Agent
 B. Received by (Printed Name) Addressed to *Paulino*
 C. Date of Delivery *10/6/07*
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type Certified Mail Express Mail
 Registered Return Receipt for Merch.
 Insured Mail CODs Yes
 4. Restricted Delivery? (Extra Fee) Yes

7007 0710 0000 8136 2565
 Domestic Return Receipt 10299-024M

UNITED STATES POSTAL SERVICE

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

Catherine Smith, Sender
 U.S. EPA
 1 Congress St., Suite 1100
 Boston, MA 02114-2023

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