

DOCKET No. CAA-01-2011-0049

confirmation of receipt (by wire) of penalty payment

IFMS Document: CR 2711103A086 - Windows Internet Explorer

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IFMS Document: CR 2711... x EPA Region 1 (New England) ... SEMS-Superfund Enterprise ...



Document Review

IFMS Document: CR 2711103A086

Document Summary: General Ledger Entries

Document: CR 2711103A086

SFO: AP27

Disbursing Office: CH27

Deposit No: 2743511

Document Date: 08/24/11

Accomplished Date: 08/23/11

Original Entry Date: 08/24/11

Amount: \$2,560.00

Document Details:

Line	Line Amt	Check No	BFY	Fund	RPIO	Org	Prog	Job No	BOC	Reference Document
001	\$2,560.00	WIRE	2011	1099	01	01				BD 2711103A086 001

Document Activity:

Date	Ref Amount	Related Document	Direction	Date	Ref Amount	Related Document	Date	Ref Amount	Related Document
08/24/11	\$2,560.00	<u>BD 2711103A086</u>	Back						

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08/24/11	\$2,560.00	BD 2711103A086	Back						

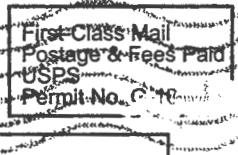
Warehouse Homepage
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	A. Signature X <i>M. Indear</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
 Mr. John Lapsley, Plant Manager Illinois Tool Works 56 Air Station Industrial Park Rockland, MA 02370	B. Received by (Printed Name)	C. Date of Delivery
SOCKET NO. CMA-01-2011-0049	Address different from item 1? <input type="checkbox"/> Yes delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	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. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7010 1870 0003 0468 6980 PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

copy of "return receipt" for delivery of signed (by all parties) ESA.
 o.g.

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Postage & Fees Paid
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18 AUG 2011 PM 3 L

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



Chris Jendras, OES 05-1
US EPA - Region 1
5 Post Office Square, Suite 100
Boston, MA 02109-3912

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