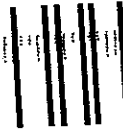


UNITED STATES POSTAL SERVICE

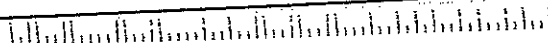


First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

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

*La Dawn Whitehead*

Regional Hearing Clerk (E-19J)  
U.S. EPA  
77 W. Jackson Blvd.  
Chicago IL 60604



**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. Jim Warner  
Ardagh Glass Inc.  
401 east Jackson Street, Suite 2800  
Tampa, Florida 33602

*TSCA-05-2012-0025*

2. Article Number

(Transfer from service label)

7009 1680 0000 7668 0752

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Cheryl Zayas*

- Agent
- Addressee

B. Received by (Printed Name)

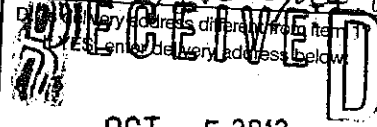
*Cheryl Zayas*

C. Date of Delivery

*10/5/12*

- Delivery address differs from item 1
- ZIP+4 on delivery address below

- Yes
- No



REGIONAL HEARING CLERK

U.S. ENVIRONMENTAL PROTECTION AGENCY

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

4. Restricted Delivery? (Extra Fee)

- Yes