

**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. and Mrs. George Goodman  
127 Guinea Drive  
Xenia, Illinois 62899

TSCA-05-2011-0005

2. Article Number

(Transfer from service label)

7009 1680 0000 7666 4592

PS Form 3811, March 2001

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

Michael Goodman

B. Date of Delivery

C. Signature

X Michael Goodman

Agent

Addressee

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

Yes

No

RECEIVED

MAR 23 2011

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

4. Restricted Delivery? (Extra Fee)

Yes

REGIONAL HEARING CLERK  
U.S. ENVIRONMENTAL  
PROTECTION AGENCY

Domestic Return Receipt

102595-01-M-1424