- 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. John Nordwall
Avista Recycling, Inc.
7900 Excelsior Blvd., Suite 700
Hopkins, MN 55343

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) C. Date of Delivery
RECEIVED 2/17/11

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

FEB 22 2011

U.S. EPA REGION 10
OFFICE OF REGIONAL COUNSEL

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7010 1060 0002 0287 9584

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7010 1060 0002 0287 9584

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage $
Certified Fee
Retur
(Endorsem
Restricted
(Endorsem
Total Pos

Mr. John Nordwall
Avista Recycling, Inc.
7900 Excelsior Blvd., Suite 700
Hopkins, MN 55343

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions