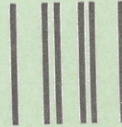


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Candace H. Smith, Regional Hearing Clerk
U.S. EPA, Region 10
1200 Sixth Avenue, Suite 900
M/S: ORC-158
Seattle, WA 98101

RCRA-10-2014-0150 ESA



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. Bob Roehl
Director of Facilities
Shoreline Community College
16101 Greenwood Avenue North
Shoreline, Washington 98133

2. Article Number
(Transfer from service label)

7013 1710 0002 3980 3373

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Jeff Keith* Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
JEFF KEITH **9/30/2014**

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

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

4. Restricted Delivery? (Extra Fee) Yes