

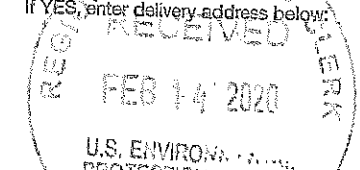


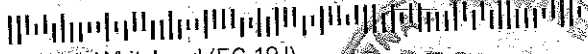


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<input type="checkbox"/> Complete items 1, 2, and 3. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: RCRA-05-2020-0007 Mr. Roy Phillips President North American Warehousing Company 6800 West 68th Street Bedford Park, IL 60638--  9590 9402 3779 8032 4848 07	B. Received by (Printed Name) HEARD, LESTER C. Date of Delivery FEB 14 2020
2. Article Number (Transfer from service label) 7014 2870 0001 9577 4301	D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No 
PS Form 3811, July 2015 PSN 7530-02-000-9053	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery

Domestic Return Receipt

<p align="center">USPS TRACKING #</p>  9590 9402 3779 8032 4848 07	 <div style="border: 1px solid black; padding: 5px; width: fit-content;"> First-Class Mail Postage & Fees Paid USPS Permit No. G-10 </div> <p align="right">RCRA-05-2020-0007</p>
<p>United States Postal Service</p>	<p>* Sender: Please print your name, address, and ZIP+4® in this box*</p>  LaDawn Whitehead (EC-19J) Regional Hearing Clerk U. S. EPA - Region 5 77 West Jackson Boulevard Chicago, IL 60604-3590 