ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
them 4 if Destricted Delivery is desired.	Missy Rigell
Drint your name and address on the reverse	C. Signature
so that we can return the card to you. Attach this card to the back of the malipiece,	X Day Cugut Addressee
or on the front if space permits.	D. Is delivery address different from item 1? Yes
. Article Addressed to:	Gellery address below:
	Krar or III
Ms. Missy Riegel	Populiters
B '44 am & Assolcates Court	AUG 0 3 2009
124 East Third Street, Suite	400 UEADING CLERK
Dayton, OH 45402	REGIONAL HEARING CLERK U.S. ENVIRONMENTAL Registrottec Florium Gents for Merchandise
Dayton, 622	Registered TEC HORIUR GENER for Merchandise
	I listing that
TSCA-05-2009-0001	4. Restricted Delivery? (Extra Fee) ☐ Yes
a Astala Number	0006 0188 0932
(Transfer from service label)	102595-01-M-14
D. selo.	Poturn Receipt 102595-01-W1-1-
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
item 4 If Restricted Delivery is desired. Print your name and address on the reverse	(Du 0 1 and
so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece, or on the front if space permits.	XNV Lasingul - Agent
	D. Is de very address officerent from them 150 Ves
Article Addressed to:	L) Fivetyradores below: 5 (IN)
Michelle Nobel	IL COLLAR III
Commission Clerk	UU AUG
Clark County Municipal Cou 50 East Columbia Street	AUG 0 3 2009 11
P.O. Box 2639	REGIONAL USASSI
Springfield, OH 45502	REGIONAL HEARING CLERK U.S. ENWRONMENTAL
	Registered TECT Refer AGE MC Merchandise
	☐ Insured Mail ☐ C.O.D.
SCA-05-2009-0004	4. Restricted Delivery? (Extra Fee)
Article Number 2001 0220	0006 0188 0949
(Transfer from service label)	the state of the s
Form 3811, March 2001 Domestic Retr	urn Recelpt 102595-01-M-1424
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	i_
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Received by (Please Print Clearly) B. Date of Deliv
Print your name and address on the reverse	C. Signature
so that we can return the card to you. Attach this card to the back of the mailpiece,	Agent
or on the front if space permits.	Y 461/C) A Moderns
Article Addressed to:	D. Is delivery address different from item 1? Yes
7.0	If YES, enter delivery address below:
Cassandre Callier Will	The state of the s
Cassandra Collier-Willian	ms, Esquire JUL 3 0 2009
P.O. Box 94062	
Cleveland, OH 441014	

all | Express Mail | C.O.D. |

TSCA - 05 - 200 9-000 | 4. Restrict Comment | Restrict Com