	ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	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.	A. Signature X
1.	. Article Addressed to:	Dy is delivery address different from item 1? Yes If YES, enter delivery address below: No
	U.S. Environmental Protection Agency Fines and Penalties Cincinnati Finance Center P.O. Box 979077 St. Louis, MO 63197-9000	3. Service Type Certified Mail
1	7010 1060 0002 0288 17	
P		709 TSCA - 10 - 11 - 0056 Return Receipt 102595-02
	51 Silit Go 11, 1 obidaly 2007 Dollada	1020000
-	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.	A. Signature A. Signature Agen Agen Addr B. Received by (Printed Name) C. Data of De
	Article Addressed to:	P. Is delivery address different from item 1? \ Yes' \[\text{NnYES, enter delivery address below:} \ No \] HEARINGS CLERY HEARINGS CLERY EPA - REGION 10
1	Cha Special Painting Ok Kyung Cha, Owner 1121 SE 31 Avenue Milwaukie, OR 97222	3. Service Type Certified Mail Express Mail Registered Return Receipt for Mercha Insured Mail C.O.D.
		4. Restricted Delivery? (Extra Fee) Yes
4		
PS	7010 1060 0002 0288 17 Form 3811, February 2004 Domestic Re	75CA 10 11 0050 eturn Receipt 102595-02-1
PS	Form 3811, February 2004 Domestic Ro	1364.10.11.0050
	Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-N
SEI C	Form 3811, February 2004 Domestic Ro	eturn Receipt 102595-02-N
SEI O	NDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you. Attach this card to the back of the mailpiece,	COMPLETE THIS SECTION ON DELIVERY A. Signature X Annua Addre B. Received by (Printed Name) C. Date of Delivery
SEI CHIHAMAN AND AND AND AND AND AND AND AND AND A	NDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Attach Addressed to: Buckley Law Suite 250	COMPLETE THIS SECTION ON DELIVERY A. Signature X A Agent B. Received by (Printed Name) C. Date of Delivery address differentifrom fleth 1? Yes If YES, enter delivery address below: No HEARINGS CLERK EPA - RECION 10
C iti	NDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Buckley Law	COMPLETE THIS SECTION ON DELIVERY A. Signature X Agent Addre B. Received by (Printed Name) C. Date of Delivery address differentifrom frep 1? P. Signature D. Isidelivary address differentifrom frep 1? Yes If YES, enter delivery address below: No