

STANDARD: 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

1. Article Number
 Adam R. Stoner, Terminal Manager
 Sunoco Partners Marketing & Terminal LP River Rouge
 500 South Dix Street
 Detroit, Michigan 48217

A. Signature
 Agent
 Address

B. Received by (Printed Name)
 Adam R. Stoner

C. Date of Delivery
 05/21/07

Differs from item 1? Yes
 No
 If Yes, print return address below:

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

4. Restricted Delivery? (Extra Fee) Yes

CAA-05-2017-0024

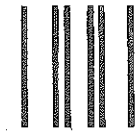
2. Article Number
 (Transfer from service label) 7001 0320 0005 8932 0249

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

RECEIVED
 CLERK
 3 2017
 U.S. ENVIRONMENTAL PROTECTION AGENCY
 REGION 5

LADAWN WHITEHEAD
 U.S. EPA - REGION 5 - E19J
 77 WEST JACKSON BLVD
 CHICAGO, IL 60604

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