

**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. Alan J. Wolf, Attorney  
Robbins, Salomon & Patt, Ltd.  
180 North LaSalle Street, Suite 3300  
Chicago, Illinois 60601

2. Article Number  
(Transfer from service label)

7009 1680 0000 7676 9327

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

D. Is delivery address different from item 1?  
If Yes, enter delivery address below:

- ☐ Yes  
☐ No

MAY 14 2013

REGIONAL HEARING CLERK

3. Service Type  
☒ Certified Mail ☐ Registered ☐ Insured Mail

- ☐ Express Mail ☐ Return Receipt for Merchandise  
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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 •

James Entzminger  
U. S. Env. Protection Agency  
OCEPP - Mail Code SC-5J  
77 West Jackson Blvd.  
Chicago, IL 60604

6PLAA-05-2013-0014  
CAFO

REGIONAL HEARING CLERK  
U.S. ENVIRONMENTAL  
PROTECTION AGENCY

MAY 14 2013

RECEIVED

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