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:

M.H. Oesterreich
Captain, U.S. Navy
Commanding Officer
Naval Surface Warfare Center, Crane Division
Code 1023, Bldg. 3260
300 Highway 361
Crane, IN 47522-5001

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☒ Agent
☐ Address

B. Received by (Printed Name) Sabine Prichard
C. Date of Delive 10-1-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED
OCT 11 2018
U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION 5
REGIONAL HEARING CLERK

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchand
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7009 1680 0000 7642 2734

PS Form 3811, July 2013 Domestic Return Receipt

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•

RCRA-05-2018-0021

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