SENDER: COMPLET A, Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent. ☐ Addressee Print your name and address on the reverse C. Date of Delivery so that we can return the card to you. B. Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Laurence Kelly MVP Technologies, Inc. JAN 27 2012 a/k/a River Shannon Recycling 7144 N. Harlem Ave., Ste. 303 3. SELCONAL HEARING CLERK Chicago, IL 60631 Certified Mail USEP Express Mail ☐ Registere REGION For Merchandise Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 7005 0390 0002 5028 8788 2. Article Number (Transfer from service label) 2ACPRI-03-P-4081 Domestic Return Receipt PS Form 3811, August 2001 First-Class Mail Postage & Fees Paid UNITED STATES POSTAL SERVICE Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box Office of Administrative Law Judges Administrative Law Judge Barbara A. Gunning 1200 Pennsylvania Ave., NW. Mail Code 1900L

Washington, DC 20460

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