

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: **CAA-05-2014-0022**

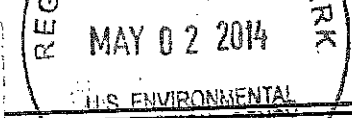
John Paule
 John Paule Metal Recycling - Alorton
 3607 Missouri Avenue
 Alorton, Illinois 62207

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Mandy Schubert* Agent Addressee

B. Received by (Printed Name) *Mandy Schubert* C. Date of Delivery *5/30*

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



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

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7009 1680 0000 7676 2908**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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 •

ATTN: Ladawn Whitehead
 U.S. Environmental Protection Agency
 Air and Radiation Division (E-19J)
 77 West Jackson Blvd.
 Chicago, Illinois 60604

