

UNITED STATES POSTAL SERVICE



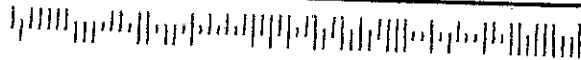
First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

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

**RECEIVED**  
AUG 6 2013  
REGIONAL HEARING CLERK  
U.S. ENVIRONMENTAL PROTECTION AGENCY

Regional Hearing Clerk (E-19J)  
EPA  
Jackson Blvd.  
Chicago, Illinois 60604

SIDNEY OH PS 45365  
AUG 2 2013  
USPS



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Barbara Rank</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>BARBARA RANK</i></p> <p>C. Date of Delivery  <i>8-2-13</i></p>
<p>1. Article Addressed to:</p> <p>Mr. Douglas Rank  D &amp; S Const. of Western Ohio, LLC  540 Bulle Road  Sidney, Ohio 45365</p> <p><i>TSCA-05-2013-0012</i></p>	<p>D. Is delivery address different from item B?  <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No  If <input checked="" type="checkbox"/> enter delivery address below:</p> <p><b>RECEIVED</b> AUG 2 2013 AUG 6 2013 REGIONAL HEARING CLERK U.S. ENVIRONMENTAL PROTECTION AGENCY</p> <p>3. Service type:  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number  (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p><b>7009 1680 0000 7676 4940</b></p>