

UNITED STATES POSTAL SERVICE



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

• Sender: Please print your name, address, and ZIP<sup>4</sup> in this box.

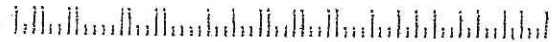
**James Entzminger**  
U.S. EPA, Region 5  
Mail Code: SC-5J  
77 W. Jackson Blvd.  
Chicago, IL 60604

CAFO  
EPLRA-05-2012-0020

REGIONAL HEARING CLERK  
U.S. ENVIRONMENTAL  
PROTECTION AGENCY

RECEIVED  
JUN 27 2012

606043860898



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>	A. Received by (Please Print Clearly)	B. Date of Delivery
1. Article Addressed to:	C. Signature <i>Joseph R. Podlewski, Jr.</i>	
<p>Joseph R. Podlewski, Jr., Attorney Podlewski &amp; Hanson P.C. 4721 Franklin Avenue, Suite 1500 Western Springs, IL 60558-1720</p>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee D. Is delivery address different from item 1? <input type="checkbox"/> Yes YES, Enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	<p>RECEIVED JUN 27 2012</p>	
	3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7009 1680 0000 7635 2307		

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424