

CA

**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:  
 Kanario Okoroafo  
 632 Pleasant St. SE  
 Grand Rapids, MI 49503

2. Article Number  
 (Transfer from service label) **7001 0320 0006 1456 1781**

**COMPLETE THIS SECTION ON DELIVERY**

- A. Received by (Please Print Clearly) \_\_\_\_\_ B. Date of Delivery **22 Apr**
- C. Signature \_\_\_\_\_  Agent  
 Addressee
- D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

**TSCA-05-2008-0009**

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.
4. Restricted Delivery? (Extra Fee)  Yes

RECEIVED  
 REGIONAL HEADQUARTERS  
 US EPA REGION IV  
 2008 APR 28 PM 4:56

CAA

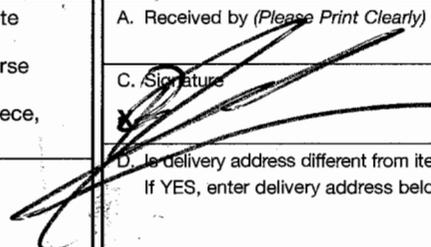
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 REGIONAL HEARINGS CENTER  
 US EPA REGION IV  
 2008 APR 28 PM 4:56