


SENDER: COMPLETE THIS SECTION | **COMPLETE THIS SECTION ON DELIVERY**

- 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.


 Mr. Douglas E. Davis
 President
 Dewitt Marine, Inc.
 6509 Crystal Springs Road
 Bellaire, Michigan 49615


EPCRA-05-2017-0025

2. Article Number
(Transfer from service label)

7009 1680 0000 7662 6965

PS Form 3811, July 2013

Domestic Return Receipt

A. Signature
 X  Agent Addressee

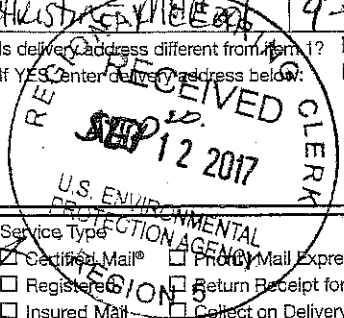
B. Received by (Printed Name)
 CHRISTOPHER W. ...

C. Date of Delivery
 9-7-17

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Mail™ Return Receipt for Merchandise
 Insured Mail™ Collect on Delivery

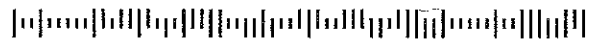
4. Restricted Delivery? (Extra Fee) Yes



UNITED STATES POSTAL SERVICE
 TOVERSE C...
 MI 496...
 07 SEP 2017

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

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


 LADAWN WHITEHEAD
 U.S. EPA - REGION 5 - E19J
 77 WEST JACKSON BLVD
 CHICAGO, IL 60604

EPCRA-05-2017-0025