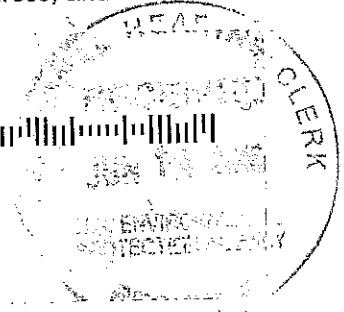




First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

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

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



CAA-05-2016-0025

ESA

**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:

Mr. Stacy Schmidt  
Director of Corporate Hazardous Management  
The Andersons, Inc.  
P.O. Box 119  
480 W. Dussel Drive  
Maumee, Ohio 43537

CAA-05-2016-0025

ESD

2. Article Number  
(Transfer from service label)

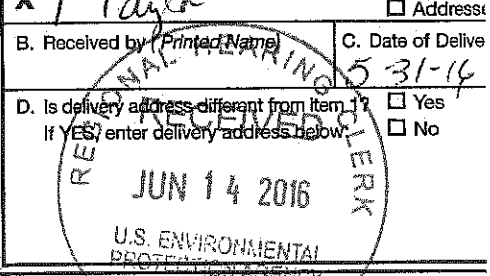
7011 1150 0000 2640 7100

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Address  
*XT Taylor*

B. Received by (Printed Name) C. Date of Delivery  
5-31-14

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



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

4. Restricted Delivery? (Extra Fee)  Yes