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:

Kevin Moran, Partner
All Seasons Energy, LLC
1338 E. Kingsley, Suite D
Springfield, MO 65804

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X _Ken Moran_

☐ Agent
☐ Addressee

B. Received by (Printed Name)   C. Date of Delivery
4·30

RECEIVED

09 MAY -5 AM 10:53

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

HEARINGS CLERK
EPA--REGION 10

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

4. Restricted Delivery? (Extra Fee)   ☐ Yes

7008 1830 0004 3073 5085   EPCRA·10·09·0117

PS Form 3811, February 2004   Domestic Return Receipt   102595-02-M-1540