SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <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. Signature  X  Agent  Addresse  B. Received by Elizabed Variation  C. Date of Deliver  3-15  D. Is delivery safety separate parategrant from term 17  Yes
Normco, Inc.	D. Is delivery address being 3 No  HEARINGS CLERK  EPA REGION 10
Norm Lippert, President   479061 HWY 95 N.	3. Service Type
Sandpoint, ID 83864 ্	Certified Mail  Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)

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