

08 OCT 31 PM 1:48

REGIONAL HEARING CLERK
EPA REGION VI



cuA-06-2008-1832 / State-Permit-Related Complaint

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:

Patrick Adams
 President
 Alec Testing and Engineering, Inc.
 6035 Fremont Street
 Riverside, CA 92504

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X Ginda Martin

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

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

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

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7003 0500 0003 0866 3755

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154C