

USPS TRACKING#



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

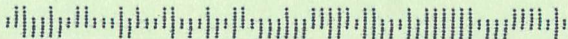
9590 9402 1627 6053 2824 75

United States
Postal Service

***Teresa Young
Regional Hearing Clerk
EPA Region 10
1200 6th Ave. Suite 900, M/S ORC113
Seattle, WA 98101***

EPLRA-10-2016-0108 1 of 2


318899



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature	<input type="checkbox"/> Agent
	<input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery
TH Benke	

1. Article
Thomas Benke
Attorney-Managing Member
The Environmental Compliance Organization LLC
7845 SW Capitol Hwy, Suite 8
Portland, OR 97219



9590 9402 1627 6053 2824 75

2. Article Number (Transfer from service label)

7016 0750 0000 4851 7643

(over \$500)

- | | |
|--|---|
| 3. Service Type | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Restricted Delivery | |

Referent from item address below: Yes No