

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. Cliff Croley
 Ricerca Biosciences LLC
 7528 Auburn Rd.
 Concord Twp, OH
 44077-9176
 RCRA-05-2015-0014 CAFO

2. Article Number
 (Transfer from service label)

7009 1680 0000 7677 9401

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *John Schmidt* Agent Addressee

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

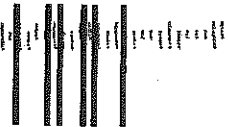
D. Is delivery address different from item 1? Yes No
 (If YES, enter delivery address below: _____)

U.S. ENVIRONMENTAL PROTECTION AGENCY
 AUG 31 2015
 RECEIVED

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

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE



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
 77 West Jackson Blvd (E-19J)
 Chicago, IL 60604-3590

