

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.

Twin City Metals, Inc.
 c/o Mark M. Myers
 Two Union Square Street, Suite 4100
 Seattle, WA 98101

07 NOV - 2

HELEN JAMES CLERK
 EPA - REGION 10

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
[Signature] Addressee

B. Recipient By (Printed Name) Date of Delivery
HELEN JAMES CLERK

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

HELEN JAMES 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

7001 2510 0006 8614 9738

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