

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.

1. Article Addressed to: **EPCRA-05-2020-0005**

Kent Chambard
 Building Projects, Fleet, and Safety Coordinator
 Lampert Lumber
 6601 Bleck Drive
 Rockford, MN 55373



9590 9402 4873 9032 5306 88

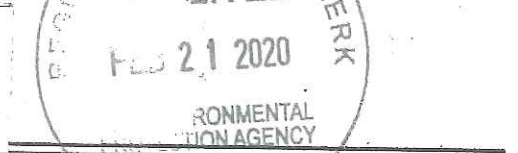
2. Article Number (Transfer from service label)

7018 3090 0002 2526 8243

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* Agent Addressee
- B. Received by (Printed Name) *[Signature]*
- C. Date of Delivery *2/10/20*
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:



3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING® #



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EPCRA-05-2020-0005

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 (EC-19J)
 Regional Hearing Clerk
 U. S. EPA - Region 5
 77 West Jackson Boulevard
 Chicago, IL 60604-3590