

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:

Michael Mathie
 Mathie Energy Supply Co. Inc.
 P.O. Box 334
 Perry, Michigan 48872

2. Article Number (Copy from service label)

7009 1680 0000 7666 1072

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

D. Is delivery address different from item 1? If YES, enter delivery address below.

Agent
 Addressee

Yes
 No

3. Service Type

- REGIONAL HEARING CLERK
- Registered MAIL
- Insured Mail C.O.D.
- Return Receipt for Merchandise
- PROTECTION AGENCY

4. Restricted Delivery? (Extra Fee)

Yes

11-6-12

M. Mathie

RECEIVED

NOV 14 2012

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
 USEPA
 77 W. Jackson Blvd. (E-19J)
 Chicago, IL 60604

