

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ Date of Delivery _____</p> <p><input type="checkbox"/> delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below _____</p>
<p>1. Article Addressed to:</p> <p>Ms. Diane M. Gagnier DMM Industries, Inc. P.O. Box 877 Owosso, Michigan 48867</p>	<p>RECEIVED JUN 14 2012 48867</p> <p>REGIONAL HEARING CLERK U.S. ENVIRONMENTAL PROTECTION AGENCY</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p> <p>EPCRA-05-2012-0017</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>7009 1680 0000 7667 8070</p> <p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>

UNITED STATES POSTAL SERVICE
LANSING MI 482

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

• Sender: Please print your name, address, and ZIP Code in this box

RECEIVED
JUN 14 2012
REGIONAL HEARING CLERK
U.S. ENVIRONMENTAL PROTECTION AGENCY

Regional Hearing Clerk (E-19J)
U.S. EPA
77 W. Jackson Blvd.
Chicago, IL 60604

