

FILED

2:00 P.M.

November 21, 2025

U.S. EPA REGION IX
HEARING CLERK

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 •

Regional Hearing Clerk
U.S. EPA Region 9
75 Hawthorne St.
San Francisco, CA 94105
NOV 21 2025

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:

Henry Simpson, CWA-09-2026-0016
976 Cross Island Rd, Apt C.
Santa Rita, GU 96915

2. Article Number
(Transfer from service label)

7015 0640 0001 1122 0062

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X C. Simpson

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Simpson

C. Date of Delivery

11-10-25

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

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes