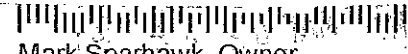
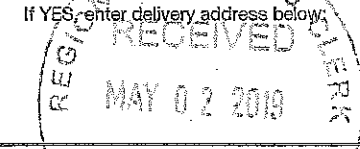



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) Mike Sacramento</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to: CAA-05-2019-0019</p> <p>1302</p>  <p>Mark Sparhawk, Owner Sparhawk Truck and Trailer, Inc. 421 25th Avenue N Wisconsin Rapids, WI 54495</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below</p>  <p>3. Service Type: ENVIRONMENTAL PROTECTION AGENCY <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7009 1680 0000 7647 3750 4/26/19</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15</p>	

UNITED STATES POSTAL SERVICE
 WI 543
 29 APR '19
 0131



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

• Sender: Please print your name, address, and ZIP+4 in this box •

CAA-05-2019-0019

LADAWN WHITEHEAD
 REGIONAL HEARING CLERK
 U.S. EPA - REGION 5 - E19J
 77 WEST JACKSON BLVD
 CHICAGO, IL 60604

