

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

William T. Curran, Esquire
CURRAN, HOLLENBECK & ORTON, SC
111 Oak Street
Mauston, Wisconsin 53948-0142

Answer
CWA 05 2011 0008

2. Article Number

(Transfer from service label)

7001 0320 0006 0188 0017

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-142

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

Vicki A. Bay

B. Date of Delivery

10-6-11

C. Signature

[Signature]

- Agent
- Addressee

D. Is delivery address different from item 1? Yes

If delivery address below: No

REGIONAL HEARING CLERK
 U.S. ENVIRONMENTAL
 PROTECTION AGENCY

RECEIVED
 OCT 21 2011

Express Mail

Registered

Return Receipt for Merchandise

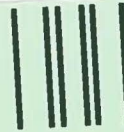
Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

UNITED STATES POSTAL SERVICE



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

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

La Dawn Whitehead
Regional Hearing Clerk (E-19J)
U.S. EPA - Region 5
77 West Jackson Blvd
Chicago, IL 60604

CWA 05 2011 0008

REGIONAL HEARING CLERK
 U.S. ENVIRONMENTAL
 PROTECTION AGENCY

RECEIVED
 OCT 21 2011

