

Mr. Mike Lazo
July 1, 2013
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If you have any questions or comments, or wish to discuss this matter further, please feel free to contact me at (937) 285-6032.

Sincerely,

A handwritten signature in cursive script that reads "Terry A. Sanner". The signature is written in black ink and is positioned above the typed name.

Terry A. Sanner
Environmental Specialist
Division of Air Pollution Control

TAS/tf

cc: Tom Schneider, SWDO/DAPC
Brian Dickens, U.S. EPA, Region 5
John Paulian, CO/DAPC

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MR MIKE LAZO
 10607 STATE STREET
 LAKEVIEW, OH 43331

PS Form 3800, August 2006 See Reverse for Instructions

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 checked="" type="checkbox"/> <i>Mike Lazo</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> MR MIKE LAZO 10607 STATE STREET LAKEVIEW, OH 43331 </div>	<p>3. Service Type <input checked="" 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>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7010 1060 0002 4250 5092</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

