

ST LOUIS  
 UNITED STATES POSTAL SERVICE  
 29 SEP 14  
 PM 7 L



BRUSSELS

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 (E-19)  
 U.S. EPA  
 77 W. Jackson Blvd.  
 Chicago IL 60604

RECEIVED  
 REGIONAL HEARING CLERK  
 OCT - 1 2014  
 U.S. ENVIRONMENTAL PROTECTION AGENCY  
 DIVISION 5

04660888

**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:

Kenneth and Sandra Odelehr  
 Odelehr's Roadside Market  
 HC 82 Box 93A  
 Brussels, Illinois 62013

*FIFRA-05-2014-0032*

2. Article Number  
 (Transfer from service label)

7009 1680 0000 7676 5626

PS Form 3811, February 2004

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee

B. Received by (Printed Name)  
*Sandra Odelehr*

C. Date of Delivery  
*9/29/14*

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

RECEIVED  
 REGIONAL HEARING CLERK  
 OCT - 1 2014

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

102585-02-M-1540