SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Received by Please Print Clearly) B. Date of Delivery C. signlature X Agent Addressee D. Is delivery address different from item 1? Yes
Article Addressed to:	If YE\$, enter delivery address below: ☐ No
Robert Marley, Chief Executive Officer Jackson-Jennings Farm Bureau Coop Asse 103 Community Drive	
Seymour, Indiana 47274 FIFRA-05-2007-000	3. Service Type □ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7001 0320 0005 8932 9188	
PS Form 3811, March 2001 Domestic Return Receipt 102595-01-M-142	
U.S. Postal Service CERTIFIED MAIL RECEIPT (Sonya Brooks-Woodard E-13J Postage Postage Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Sent To Robert Marley, Chief Executive Officer Street, Apt. No., Jackson-Jennings Farm Bureau Coop Asso Or PO Box No. City, State, ZiP Seymour, Indiana 47274 PS Form 3800. January 2001 See Reverse for Instructions	