

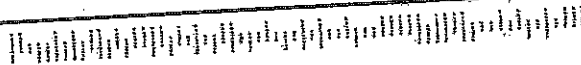
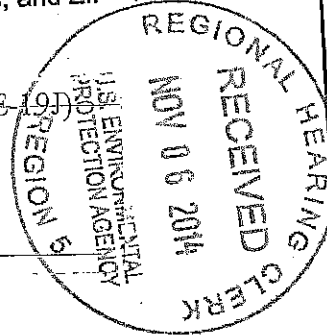
UNITED STATES POSTAL SERVICE

49690 MI 49637
64 NOV 2014 PM

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, Illinois 60604



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:

Gaye Hershberger
Advent-Age Products, Inc.
6669 M 72 East
Williamsburg, Michigan 49690

FIFRA-05-2015-0005

2. Article Number
(Transfer from service label)
PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

- Agent
- Addressee

C. Date of Delivery

11/4/14

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

U.S. ENVIRONMENTAL PROTECTION AGENCY

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

7009 1680 0000 7674 4102

Domestic Return Receipt

102595-02-M-1540