

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Minoro Kogure
Agent for Service-U.S. Jaclean
10 Palos Verdes Lane
Rolling Hills Estates, CA
90274



9590 9402 4257 8121 0633 19

2. Article Number (Transfer from service label)

7019-0140-0000-7661-7816

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X MK RM 436 019

- Agent
- Addressee

B. Received by (Printed Name)

Signed 3849

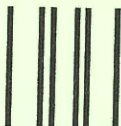
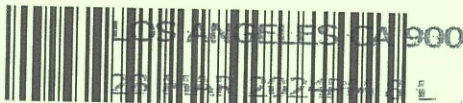
C. Date of Delivery

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING#



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

9590 9402 4257 8121 0633 19

US Tacklean, Inc.
~~19~~ *FIFRA-09-2024-0043*

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

Regional Hearing Clerk, ORC-1
US EPA, Region 9
75 Hawthorne Street
San Francisco, CA 94105

APR 17 2024

