

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:

Peter Bromley, President
c/o David L. Olson
United Phosphorus, Inc.
630 Freedom Business Center, Suite 402
King of Prussia, PA 19406

2. Article Number

(Transfer from service label)

7001 0320 0005 8910 5065

PS Form 3811, March 2001

Domestic Return

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

Megan Maker

6/25/07

C. Signature

X M. Megan Maker

☐ Agent☐ AddresseeD. Is delivery address different from item 1? ☐ YesYES, enter delivery address below: ☐ No

FIFRA-05-2007-0034

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service

CERTIFIED MAIL RECEIPT

Sonja Brooks-Woodard E-13J

(provided)

FIFRA-05-2007-0034

Postage

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Peter Bromley, President
c/o David L. OlsonStreet, Apt. No.,
or PO Box No.

United Phosphorus, Inc.

City, State, ZIP+4

630 Freedom Business Center, Suite 402
King of Prussia, PA 19406

PS Form 3800, January 2001

See Reverse for Instructions

7001 0320 0005 8910 5065