

**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:

FIFRA-07-2009-0011

J.P. Carman, President  
Carman Chemicals, Inc.  
25358 Business Highway 24 West  
Paris, Missouri 65275

2. Article Number  
(Transfer from :

7006 2760 0000 8648 7063

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Addressee  
*Jonice Carman*
- B. Received by (Printed Name) C. Date of Delivery  
*Jonice Carman* *7-3-09*
- D. Is delivery address different from Item 1?  Yes  
If YES, enter delivery address below:  No

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

4. Restricted Delivery? (Extra Fee)  Yes