

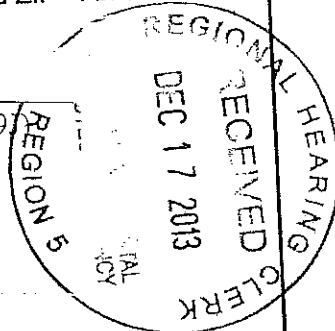
UNITED STATES POSTAL SERVICE



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:

Ms. Cynthia L. Taub
Steptoe & Johnson LLP
1330 Connecticut Avenue, NW
Washington, D.C. 20036

FIFRA-05-2014-0004

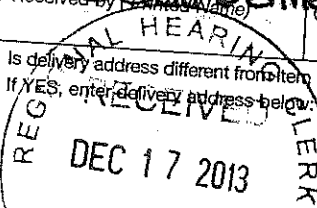
2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Print Name) *Delcia Bennett*
 C. Date of Delivery

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 E.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7009 1680 0000 7675 0066

Domestic Return Receipt

102595-02-M-1540