

**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:



**Mr. Mark Clark  
Neptune Pool & Spa, Inc.  
3557 W. Jefferson ST.  
Joliet, Illinois 60431**

**FIFRA-05-2009-0012**

2. Article Number  
(Transfer from service label)

7001 0320 0006 0182 9573

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery  
Viola P Tomko 4-27-09

C. Signature  
X *Viola P Tomko*  Agent  Addressee

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

**RECEIVED**  
APR 29 2009

**REGIONAL HEARING CLERK**

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

4. Restricted Delivery? (Extra Fee)  Yes