SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signaturie X
1. Article Addressed to:	D. Is delivery address different from item 1? Yes if YES, enter delivery address below:
Liz Dixon Vice President of Operations Shrieve Chemical Co. 1755 Woodstead Court The Woodlands, TX 77380	RECEIV U.S. E.P APPEA
	3. Service Type Certified Mail Registered Registered Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7003	1680 0000 5220 4039
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