

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. Kyle Rogotzke
 Farmward Cooperative
 711 Front Street
 Authorized Company Official
 Morgan, Minnesota 56266

FIFRA-05-2019-0012

2. Article Number

(Transfer from service label)

7011 1150 0000 2643 7817

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Sue Christensen

- Agent
- Address

B. Received by (Printed Name)

Sue Christensen

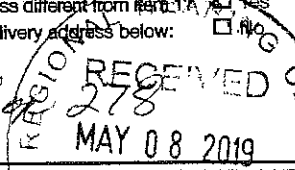
C. Date of Delivery

4-30-19

D. Is delivery address different from item 1A? Yes No

If YES, enter delivery address below:

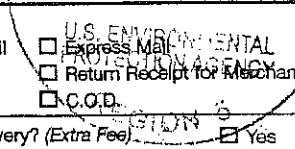
P.O. Box 278



3. Service Type

- Certified Mail
- Registered
- Insured Mail

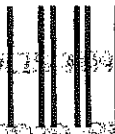
- Express Mail
- Return Receipt for Merchandise
- C.O.D.



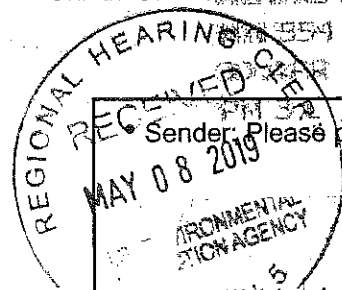
4. Restricted Delivery? (Extra Fee)

- Yes

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 •

FIFRA-05-2019-0012 RECEIVED



LaDawn Whitehead (E-19J)
 U.S. EPA - Region 5
 77 West Jackson Boulevard
 Chicago, IL 60604-3590

