

**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. Joseph R. Robinson  
Lonza Inc.  
90 Boroline Drive  
Allendale, NJ 07401

**FIFRA-05-2010-0009**

2. Article Number

(Transfer from service label)

7001 0320 0006 0189 9354

PS Form 3811, March 2001

**COMPLETE THIS SECTION ON DELIVERY**

A. Received By (Please Print Clearly)

B. Date of Delivery

4-1-10

C. Signature

X

J. M. Smith

- Agent
- Addressee
- Yes
- No

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

If Yes, enter delivery address below:

APR 07 2010

REGIONAL HEARING CLERK

ENVIRONMENTAL

PROTECTION AGENCY

3. Service Type

- Registered Mail
- Registered Mail
- Return Receipt for Merchandise
- Insured Mail
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt

102595-01-M-1424