




SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Signature <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) HEARSH BLAN</p> <p>C. Date of Delivery 4/4/16</p>
<p>1. Article Addressed to:</p>  <p>Mr. Roy Lee Carter Sharda USA, LLC 7217 Lancaster Pike, Suite A Hockessin, Delaware 19707</p> <p>FIFRA-05-2016-0006 (CAPO)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (transfer from service label)</p> <p>7011 1150 0000 2639 8651</p>	<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15</p>

UNITED STATES POSTAL SERVICE




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FIFRA-05-2016-0006