

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Celeste Conner</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Address</p> <p>B. Received by (Print Name)  <i>Celeste Conner</i></p> <p>C. Date of Delivery  <i>9/21/18</i></p>
<p>1. Article Addressed to: <b>FIFRA-05-2018-0046</b></p> <p>Mr. James Carso  President  Carso, Incorporated  Post Office Box 139  Camargo, IL 61919</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>  <b>OCT 16 2018</b>  <b>REGIONAL CLERK</b>  <b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b></p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Priority Mail Express™  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number  (Transfer from service label)</p>	<p><b>7011 1150 0000 2643 7312</b></p>

PS Form 3811, July 2013

Domestic Return Receipt

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-05-2018-0046**

**RECEIVED**  
**OCT 16 2018**  
**REGIONAL CLERK**  
**U.S. ENVIRONMENTAL PROTECTION AGENCY**

LADAWN WHITEHEAD  
REGIONAL HEARING CLERK  
U.S. EPA - REGION 5 - E19J  
77 WEST JACKSON BLVD  
CHICAGO, IL 60604