

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

7009 3410 0000 2595 5129

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement)		

9/28/12

Postmark
Here

Boe Lautenschlager, President
Western Ag. Services, Inc.

P. O. Box 8
 Berthold, ND 58718

DOCKET NO.: FIFRA-08-2012-0018

Sent To
 Street, Apt
 or PO Box
 City, State

PS Form 3800, August 2006

See Reverse for Instructions

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:

Boe Lautenschlager, President
Western Ag. Services, Inc.
 P. O. Box 8
 Berthold, ND 58718
DOCKET NO.: FIFRA-08-2012-0018

F OCT - 1 2012

2. Article (Trans) 7009 3410 0000 2595 5129

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Petra Ruthford

B. Received by (Printed Name) *Petra Ruthford* C. Date of Delivery *10-4-12*

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540