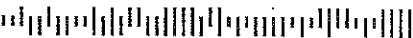


SENDER: COMPLETE THIS SECTION

- 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. A 
 Mr. Nick Dadant
 Vice President
 Dadant & Sons, Incorporated
 51 South 2nd Street
 Hamilton, IL 62341

FIFRA-05-2018-0022

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

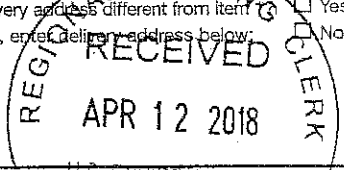
A. Signature Agent
X [Signature] Address

B. Received by (Printed Name) *Brain [Signature]* C. Date of Delivery *4-9-18*

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

3. Service Type **U.S. ENVIRONMENTAL PROTECTION AGENCY REGION 5**
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



7009 1680 0000 7662 7375

PS Form 3811, July 2013


Domestic Return Receipt

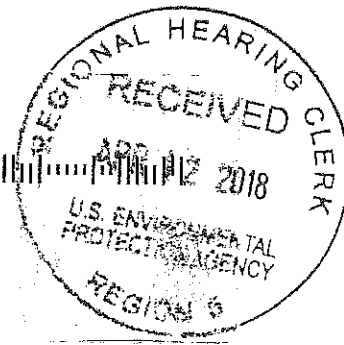
UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box•


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



FIFRA-05-2018-0022