

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:

Norman Glassberg, President
Trade Associates Group
1730 West Wrightwood Avenue
Chicago, IL 60614

FIFRA-05-2010-0013

2. Article Number

(Transfer from service label)

7001 0320 0006 0189 8210

PS Form 3811, March 2001

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Alex Martinez 4/21/10

C. Signature

Alex

Agent

Addressee

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes

No

RECEIVED

APR 23 2010

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

**REGIONAL HEARING CLERK
U.S. ENVIRONMENTAL
PROTECTION AGENCY**

Domestic Return Receipt

102595-01-M-1424