

**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:

**Mr. Kenneth Ditekowsky**  
**5940 W. Touhy Avenue**  
**Suite 230**  
**Niles, Illinois 60714**

**FIFRA-05-2009-0013**

2. Article Number  
(Transfer from service label)

**7001 0320 0006 0182 9504**

PS Form 3811, March 2001

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

B. Date of Delivery

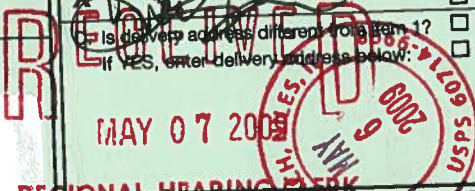
**5/6/09**

C. Signature

*[Signature]*

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

- Agent
- Addressee
- Yes
- No



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

- Registered
- Insured Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt

102595-01-M-1424