

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:

Ralph Stout, President
406 Burrell Avenue
Lewiston, ID 83540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X  Addressee

B. Received by (Printed Name) Date of Delivery
RECEIVED **9-26**

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

1 **SEP 28 8 42 AM '18**
HEARINGS CLERK
EPA--REGION 10

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

4. Restricted Delivery? (Extra Fee) Yes

7010 1060 0002 0288 2669

FIFRA-10-11-0151