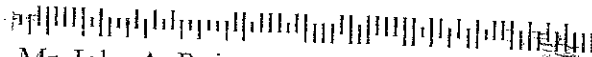


**SENDER: COMPLETE THIS SECTION**

- 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: **FIFRA-05-2018-0030**



Mr. John A. Roiger  
 General Manager  
 Lac Qui Parle Coop Oil Company, Incorporated  
 Post Office Box 350  
 Dawson, MN 56232

2. Article Number  
(Transfer from service label)

7001 0320 0006 0188 0437

PS Form 3811, July 2013

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Address  
 B. Received by (Printed name)  Date of Delivery  
 C. Date of Delivery  
 D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below  No

**RECEIVED**  
**JUN - 4 2018**  
 U.S. ENVIRONMENTAL PROTECTION AGENCY  
 3. Service Type  
 Certified Mail®  Priority Mail Express™  
 Registered Mail  Return Receipt for Merchandise  
 Collect on Delivery  
 Restricted Delivery? (Extra Fee)  Yes

UNITED STATES POSTAL SERVICE

MINNEAPOLIS MN 554

29 MAY 2018 PM 8

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  
 U.S. EPA - REGION 5 - E19J  
 77 WEST JACKSON BLVD  
 CHICAGO, IL 60604

FIFRA-05-2018-0030