SENDER: CO

- Complete ite
  item 4 if Res
- 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-05-2018-0035

Mr. Kevin Devereaux
Chandler Co-op
P.O. Box 205
Chandler, Minnesota 56122

B. Received by (Printed Name) K. Devereaux C. Date of Delive 6/21/18

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

RECEIVED JUN 21 2018 U.S. ENVIRONMENTAL PROTECTION AGENCY REGION 5

3. Service Type
☑ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandi
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7009 1680 0000 7666 2147

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•

RECEIVED JUN 21 2018 U.S. ENVIRONMENTAL PROTECTION AGENCY REGION 5 REGIONAL HEARING CLERK

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

FIFRA-05-2018-0035