

**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:

Hunter's Specialties  
FIFRA-07-2008-0001

Steven J. Pace  
Shuttleworth & Ingersoll, P.L.C.  
PO Box 2107  
Cedar Rapids, Iowa 52406-2107

2. Article Number  
(Transfer from)

7006 2760 0000 8651 6701

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]*  Agent  
 Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

8-11-08

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)  Yes