

**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:

*SEP 30 2011*  
H. Alan Oehlschlager  
Chemtica USA, Inc.  
3412 Stafford Dr.  
Norman, OK 73072 *B*

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent

*H. Alan Oehlschlager*  Addressee

B. Received by (Printed Name) C. Date of Delivery

*J. Oehlschlager* *10-3-11*

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

*9-30-11*

3. Service Type

Certified Mail  Express Mail

Registered  Return Receipt for Merchandise

Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

*FIFRA - 08-2011-0014*  
7009 3410 0000 2594 6165

Domestic Return Receipt

102595-02-M-1540