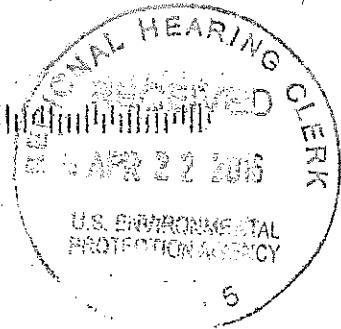




First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

° Sender: Please print your name, address, and ZIP+4 in this box °

LaDawn Whitehead
Regional Hearing Clerk
U.S. EPA - Region 5
77 West Jackson Blvd (E-19J)
Chicago, IL 60604-3590



FIFRA 05 2016 0007

CAFO

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:

Mr. Russ Garrison
Stepan Company
22 West Frontage Road
Northfield, Illinois 60093

FIFRA 05 2016 0007 CAFO

2. Article Number:
(Transfer from service label)

7011 1150 0000 2640 6738

COMPLETE THIS SECTION ON DELIVERY

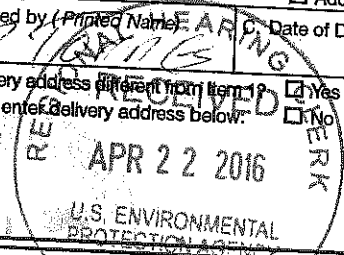
A. Signature

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name): *LaDawn Whitehead* Date of Delivery

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



3. Service Type

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

4. Restricted Delivery? (Extra Fee) Yes