

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- 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 **FIFRA-05-2020-0013**

1. Article Addressed to:

Mr. David Myroth
 Safety Coordinator
 Conserv FS, Inc.
 Post Office Box 1550
 Woodstock, IL 60098



9590 9402 4873 9032 5304 35

2. Article Number (Transfer from service label)

7018 3090 0002 2526 7631

A. Signature
 X *David Myroth* Agent Address

B. Received by (Printed Name) *David Myroth* C. Date of Delivery *1/28/20*

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

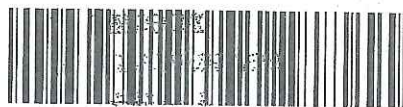
REGIONAL RECEIVED
 JAN 28 2020
 U.S. ENVIRONMENTAL PROTECTION AGENCY
 REGION 5

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation
 - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 4873 9032 5304 35 FIFRA-05-2020-0013

United States Postal Service

Order: Please print your name, address, and ZIP+4® in this box®



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