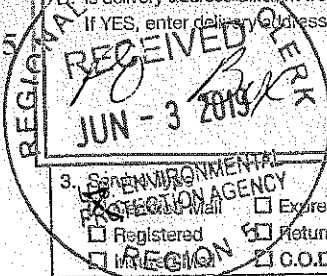
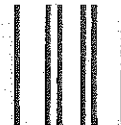


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <i>M. Richard Bell</i></p> <p>B. Received by (Printed Name) <i>M. Richard Bell</i></p> <p>C. Date of Delivery <i>5-28-19</i></p> <p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to: <b>FIFRA-05-2019-0015</b></p> <p>Ms. Laura Richard EHS Manager Sunrise Service Company 20735 State Route 125 West Virginia, IL 62691</p>	<p>3. Special Services: <input type="checkbox"/> Registered Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7033 3350 0000 2643 7800</p> <p>5/24/19</p>



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

FIFRA-05-2019-0015

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