

SENDER: COMPLETE THIS SECTION

COMPLETER: THIS SECTION FOR DELIVERY

- ☑ 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.

A. Signature Agent
Sharon Hostler Addressee

B. Received by (Printed Name) *Sharon Hostler* C. Date of Delivery *4/17/17*

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

REGIONAL RECEIVED OFFICE
 APR 24 2017

1. Article Addressed to:

Mr. James E. Lutter
 President
 LaOtto Farm Supplies, Incorporated
 Post Office Box 155
 LaOtto, Indiana 46763

3. Service Type: ENVIRONMENTAL

Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

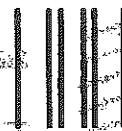
2. Article Number
 (Transfer from service label)

7014 2870 0001 9577 4677

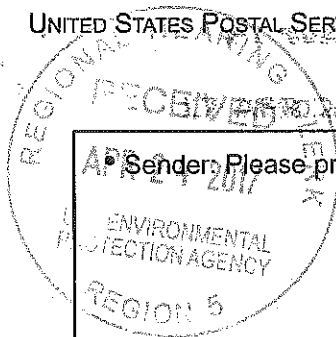
PS Form 3811, July 2013

Domestic Return Receipt

UNITED STATES POSTAL SERVICE



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



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

Abigail Wesley
 Pesticides & Toxics Compliance Section
 U.S. EPA, Region 5 (LC-17J)
 77 West Jackson Boulevard
 Chicago, Illinois 60604

RECEIVED
 DIVISION RECIPIENT OFFICE

APR 19 2017

LAND AND CURRICIAL DIVISION