

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Max E. Aron</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Max E. Aron</i> C. Date of Delivery <i>3/18/15</i></p>
<p>1. Article Addressed to:</p> <p>Mr. Paul Husemoller Purdy Products Company 1255 Karl Court Wauconda, Illinois 60084</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>U.S. ENVIRONMENTAL PROTECTION AGENCY REGION 5</p>
<p>FIFRA-05-2015-0030 <i>CAFO</i></p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>7011 1150 0000 2643 8319</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

UNITED STATES POSTAL SERVICE

WAUCONDA, ILL. 60084
MAR 18 2015

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

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

Regional Hearing Clerk
U.S. EPA
77 W. Jackson Blvd.
Chicago, Illinois 60604

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION 5
RECEIVED
MAR 18 2015
REGIONAL HEARING CLERK

7011 1150 0000 2643 8319