

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:

John Ripple
 Morrow County Grain Growers, Inc.
 350 Main Street
 Lexington, OR 97839

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Valerie Krieger

- Agent
- Addressee

B. Received by (Printed Name)

Valerie Krieger

C. Date of Delivery

9-23-11

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

11 SEP 2011
 HEARINGS CLERK
 EPA -- REGION 10

3. Service Type

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

4. Restricted Delivery? (Extra Fee) Yes

7010 1060 0002 0288 3130

FIFRA 10-11-0138