

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:

Young Choi
S.L.I. Corporation
3445 N. Kimball Ave
Chicago, IL 60618

2. Article Number
(Transfer from service label) **7001 0320 0006 0185 8788**

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery **7-21**

C. Signature *[Handwritten Signature]* Agent Addressee

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

FIFRA-05-2007-004 |

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7001 0320 0006 0185 8788

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Postage, Return Receipt Fee, and Restricted Delivery Fee are provided)

Sonja Brooks-Woodard E-13J

FIFRA-05-2007-0041

Postage	\$ 131
Certified Fee	265
Return Receipt Fee (Endorsement Required)	215
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 611

Postmark Here

Sent To **Young Choi**
 Street, Apt. No.; or PO Box No. **S.L.I. Corporation**
3445 N. Kimball Ave
 City, State, ZIP+4 **Chicago, IL 60618**

PS Form 3800, January 2001 See Reverse for Instructions