

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: **FIFRA-05-2018-0048**

Mr. Jeffrey Earp
 Co-Owner
 Earp Spray Service
 2273 US Highway 67
 Monmouth, IL 61462

2. Article Number
 (Transfer from service label)
 PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x *J. Earp*

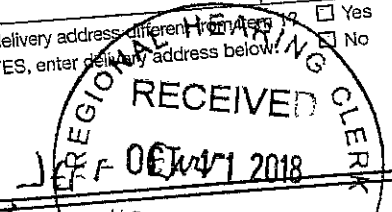
B. Received by (Printed Name) *J. Earp*

C. Date of Delivery
10-6-18

D. Is delivery address different from Agent's?
 If YES, enter delivery address below Yes No

3. Service Type U.S. Priority Mail Express™
 Certified Mail™ Registered Mail™
 Insured Mail™ Return Receipt for Merchandise
 Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



7011 1150 0000 2643 7329

Domestic Return Receipt

UNITED STATES POSTAL SERVICE

06 OCT 2018 PM 3 L

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

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

FIFRA-05-2018-0048



LADAWN WHITEHEAD
 REGIONAL HEARING CLERK
 U.S. EPA - REGION 5 - E19J
 77 WEST JACKSON BLVD
 CHICAGO, IL 60604

