

UNITED STATES POSTAL SERVICE



HEAR

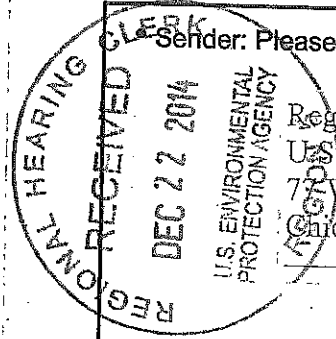
First-Class Mail
Postage & Fees Paid

UNITED STATES POSTAL SERVICE

CAP DISTRICT
NO 204
DEC 24
PM 7A



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

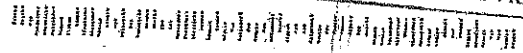


Sender: Please print your name, address, and ZIP+4 in this box *

Regional Hearing Clerk (E-19J)
U.S. EPA
77 W. Jackson Blvd.
Chicago, Illinois 60604

RECEIVED
USEPA REGION 5
DEC 19 2014
OFFICE OF ENFORCEMENT &
COMPLIANCE ASSURANCE

9504360899



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:

Ms. Lisa Burchi
Bergeson & Campbell
2200 Pennsylvania Ave. N W, Suite 100 W
Washington, D.C. 20037

FIFRA-05-2015-0015

2. Article Number
(Transfer from service label)

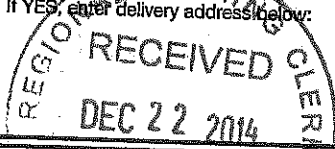
7011 1150 0000 2643 8142

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Signature] Agent Addressee

B. Received by (Printed Name)
Odeth Y. Lujan C. Date of Delivery

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



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

4. Restricted Delivery? (Extra Fee) Yes