| | SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
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| | 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 mailplece, or on the front if space permits. 1. Article Addressed to: FIFRA - 07 - 2010 - 0016 Michael Le Manager/CEO Millenia Production 3201 N. Mead Street Wichita, Kansas 67219 | A. Signature A. Signature A. Addree B. Received by (<i>Printed Name</i>) C. Date of Del Cherry (Jenson G-28-c) 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 Merchan Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes |
| | 2. Article Number 7006 2760 000 | |
| | (Transfer from ser | |

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