

**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:

**Mr. Geoff Quick  
Nufarm Americas Inc.  
150 Harvester Drive, Suite 200  
Burr Ridge, Illinois 60527**

*FIFRA-05-2008-0023*

2. Article Number  
(Transfer from service label)

7001 0320 0005 8921 6297

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

*Teri Harrop* *8/11*

C. Signature  Agent  
*X Teri Harrop*  Addressee

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