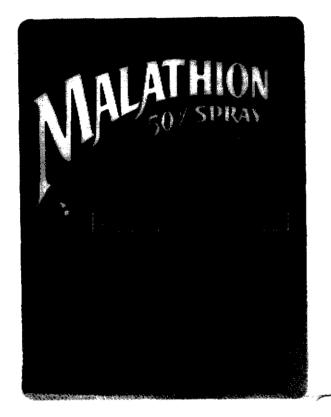
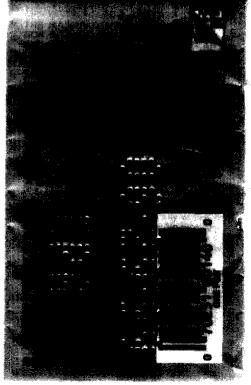
Environmental Protection Agency Weshington, DC 20460    Amendment	### Environmental Protection Agency   Registration   Amendment   Vision   Amendment   Vision   Vision	33951	5 - 394 erse before completing	form 07/0	9/1999	Form Appro	7) 7 / // oved. OMB No. 2	070-0060.	Approval Exp	oires 05-31-98
1. Company/Product Number 33955-394 2. EPA Product Manager Robert Forrest Robert Forrest Add Company/Product (Name) Amen Malathino Spray 5. Name and Address of Applicant (Include ZIP Code) (PMd 4)	1. Company/Product Number 33955-394	<b>EPA</b> Environmental Protection A			s ction Agenc	у [	Registra Amendm	ition	1	ifier Number
4. Company/Product (Name) Acroe Malathion Spray 5. Name and Address of Applicant (Include ZIP Code) PB/IG/Gordon Corporation, Acroe Division PO Box 014090 Kansas City, Missouri 64101    Amendment - Explain below.   Explain period labels in response to Agency latter dated   Product Name	4. Company/Product (Name) Acrie Malathion Spray 5. Name and Address of Applicant (Include ZIP Code) 5. Name and Address of Applicant (Include ZIP Code) PB/Gordon Corporation, Acrie Division PO Box 014090 Kansas City, Missouri 64101    Check if this is a new address   Check if this is a new address   Check if this is a new address   Product Name		<i></i>	Application	n for Pestici	de - Sectio	on l			
Acme Malathion Spray  5. Name and Address of Applicant (Include ZIP Code) PBI/Gordno Corporation, Acme Division PD Box 014090 Kansas City, Missouri 64101    Check if this is a new address   Check if	S. Name and Address of Applicant (Lindot 2/P Cade) PBI/Gordon Corporation, Acme Division PO Box 014090 Kansas City, Missouri 64101 Check if this is a new address    Check if this is a new address   Product Name	Company/Product Numl			2. EPA		-	3. Pro	oposed Class	sification
5. Name and Address of Applicant (Include ZIP Code) PBI/Gordon Corporation, Acme Division PO Box 014090 Kansas City, Missouri 64101 Product is similar or identical in composition and labeling (b(l)), my product is similar or identical in composition and labeling to: EPA Reg. No. Product Name  Section - II  Amendment - Explain below. Reaubmission in response to Agency letter dated NOTIFICATION NOTIFICATION NOTIFICATION NOTIFICATION NOTIFICATION of Atternate Brand Name per PR Notice 98-10: We are requesting the alternate brand name of "Gordon's Malathion 50% Spray." Two (2) copies of the final printed labeling and a self-addressed envelope are enclosed. Please pin-punch one container label and return to satisfy state registration requirements. This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40CFR 152.48, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to the EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40CFR 152.48, this product. I understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40CFR 152.48, this product. I understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40CFR 152.48, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under Section 12 and 14 of FIFRA.  Section - III  1. Material This Product Will Be Packaging Unit Packaging Section - IV  1. Location of Net Contents information 4. Size(e) Retail Container On Label On	S. Name and Address of Applicant (Include ZIP Code) PBI/Gordon Corporation, Acme Division PO Box 014090 Kansas City, Missourl 64101	, , , ,	•	•	PM#	(PMd	14)	$\overline{}$	] <sub>None</sub>	Restricted
Amendment - Explain below.  Resubmission in response to Agency letter dated	Amendment - Explain below.  Resubmission in response to Agency letter dated   The Total Control of Paper State of Agency letter dated   The Total Control of Paper State of	5. Name and Address of A PBI/Gordon Corporati PO Box 014090 Kansas City, Missouri	pplicant ( <i>include Zli</i> on, Acme Division 64101	P Code)	(b)(i), to: EPA F	6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to:  EPA Reg. No.				
Agency letter dated  Resubmission in response to Agency letter dated  Notification - Explain below.  Explanation: Use additional page(s) if necessary, (For section I and Section II.)  NOTIFICATION of Alternate Brand Name per PR Notice 98-10:  We are requesting the alternate brand name of "Gordon's Malathion 50% Spray."  Two (2) copies of the final printed labeling and a self-addressed envelope are enclosed. Please pin-punch one container label and return to satisfy state registration requirements.  This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40CFR 152.48, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40CFR 152.48, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under Section 12 and 14 of FIFRA.  Section - III  1. Material This Product Will Be Packaging  Yes  No  No  Certification must  be submitted  If Yes'  Yes  No  No  Certification fixed Contents Information  Label  Container  4. Size(s) Retail Container  Water Soluble Packaging  Yes  No, per  Package wgt. Container  On Label  Container  On Label  Section - IV  1. Contact Point (Complete items directly below for Identification of Individual to be contacted, if necessary, to process this epplication.)  Title  Manager of Regulatory Services  Title  Manager of Regulatory Services  Title  Manager of Regulatory Services  **Totach Point (Agency And Code)  **Totach Point (Complete items directly below for Identification of Individual to be contacted, if necessary, to process this epplication.)	Agency letter dated   Mo Too' Application.   Jul 9 1999				Section -	ll				
Explanation: Use additional page(s) if necessary. (For section I and Section II.)  NOTIFICATION of Alternate Brand Name per PR Notice 98-10:  We are requesting the alternate brand name of "Gordon's Malathion 50% Spray."  Two (2) copies of the final printed labeling and a self-addressed envelope are enclosed. Please pin-punch one container label and return to satisfy state registration requirements.  This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40CFR 152.48, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C.Sec. 1001 to willfully make any false statement to the EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40CFR 152.48, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under Section 12 and 14 of FIFRA.  Section - III    Meterial This Product Will Be Packaged In:	Notification - Explain below.   Other - Explain below.			ed		Agency letter da	ated _	MU		
NOTIFICATION of Alternate Brand Name per PR Notice 98-10:  We are requesting the alternate brand name of "Gordon's Malathion 50% Spray."  Two (2) copies of the final printed labeling and a self-addressed envelope are enclosed. Please pin-punch one container label and return to satisfy state registration requirements.  This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C.Sec. 1001 to willfully make any false statement to the EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under Section 12 and 14 of FIFRA.  Section - III  1. Material This Product Will Be Peckaged In:  Child-Resistant Packaging  Ves*  No. per  Ves  No. per  Other (Specify)  3. Location of Net Contents Information  Label  Container  Section - IV  1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Title  Manager of Regulatory Services  **  Telephone No. (Include Area Code)  816.4646-6287	NOTIFICATION of Alternate Brand Name per PR Notice 98-10:  We are requesting the alternate brand name of "Gordon's Malathion 50% Spray."  Two (2) copies of the final printed labeling and a self-addressed envelope are enclosed. Please pin-punch one container la and return to satisfy state registration requirements.  This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40CFR 152.46, and no of changes have been made to the labeling or the confidential statement of formula of this product. I understand that if this violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to the EPA. I further understand that if this notifical is not consistent with the terms of PR Notice 98-10 and 40CFR 152.46, this product may be in violation of FIFRA and I in be subject to enforcement action and penalties under Section 12 and 14 of FIFRA.  Section - III  1. Material This Product Will Be Packaged In:  Child-Resistant Packaging Unit Packaging Water Soluble Packaging Paper Wes Package wgt. Container Package wgt.  Certification must by No. per Water Soluble Packaging Other (Specify)  3. Location of Net Contents Information 4. Size(s) Retail Container Other (Specify)  3. Location of Net Contents Information Container Package wgt. Container Other (Specify)  5. Location of Label Directions  Con Label Container Other (Specify)  1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Name Title Manager of Regulatory Services  Title Manager of Regulatory Services  1. Certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. 1 acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or \$1. Certify that the statements I have made on this form and all attachments there is the product of the product (Stamped)	나 님				,,		ال	UL - 9 1	1999
*Certification must be submitted  If "Yes" Unit Packaging wgt. Vo. per Container  A. Size(s) Retail Container  4. Size(s) Retail Container  5. Location of Label Directions On Label On Label On Labeling accompanying product  6. Manner in Which Label is Affixed to Product Paper glued Stenciled  Section - IV  1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Title Oracle Manager of Regulatory Services  Title Manager of Regulatory Services  Glass Paper Paper Other (Specify)  5. Location of Label Directions On Label On Label On Labeling accompanying product  Title Telephone No. (Include Area Code) 8 16:466-6287	* Certification must be submitted  If "Yes" Unit Packaging wgt. No. per Package wgt. No. per Package wgt. No. per Package wgt. Other (Specify)  3. Location of Net Contents Information  Label Container  4. Size(s) Retail Container  5. Location of Label Directions On Label On Labeling accompanying product  6. Manner in Which Label is Affixed to Product Lithograph Paper glued Stenciled  Section - IV  1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Name  Title Manager of Regulatory Services  6. Date Application Rescribed (Stamped)  7. Signature  Manager of Regulatory Services	Two (2) copies of the fir and return to satisfy sta This notification is conschanges have been may violation of 18 U.S.C.S. is not consistent with the subject to enforcement.  1. Material This Product Will Endid-Resistant Packaging  Yes*	nal printed labeling te registration requests tent with the product to the labeling ec. 1001 to willful te terms of PR Notent action and pentaction and pent	g and a self- uirements. rovisions of g or the con ly make any tice 98-10 a	PR Notice 98- fidential statem false statemer and 40CFR 152 Section 12 and Section - Water Soluble F	elope are enc 10 and EPA nent of formunant to the EPA .46, this produced in 14 of FIFRA	regulations a ila of this pro . I further un luct may be in .	at 40CFR oduct. I inderstand in violatio	152.46, a understan	and no other d that it is a s notification
Label Container  Container  Container  Container  Contabel On Label On Labeling accompanying product  Contabeling accompanying product  Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Name  Craig Martens  Title  Manager of Regulatory Services  Craig Martens  Contact Point (Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Title  Manager of Regulatory Services  Telephone No. (Include Area Code)  8 16/46C-6287	Label Container On Label On Labeling accompanying product  6. Manner in Which Label is Affixed to Product Lithograph Other Paper glued Stenciled  Section - IV  1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Name Title Telephone No. (Include Area Code) Manager of Regulatory Services 8: 6:46C-6287  Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.  2. Signature Manager of Regulatory Services  Manager of Regulatory Services	* Certification must	"' '		ş		Pap	er		
Paper glued Stenciled  Section - IV  1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Name Craig Martens Title Manager of Regulatory Services Telephone No. (Include Area Code) 8 6/46C-6287	Paper glued   Stenciled	· · ·			ail Container	5	On Label			
1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  Name  Title  Telephone No. (Include Area Code)  Manager of Regulatory Services  816/46C-6287	1. Contact Point (Complete items directly below for identification of Individual to be contacted, if necessary, to process this application.)  Name  Title  Craig Martens  Certification  I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.  3. Title  Manager of Regulatory Services  Manager of Regulatory Services	6. Manner in Which Label is Af	fixed to Product	Paper glu	ued	Other			6.6.c. t	
Name Craig Martens Title Manager of Regulatory Services Telephone No. (Include Area Code) 816/46C-6287	Title  Craig Martens  Certification  I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.  Certification  I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.  Certification  Rescrived  (Stamped)								4 i	
	Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.  3. Title  Manager of Regulatory Services	Name		entification of Ind	Title		<b>1</b>		No. (Include	
I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete.  I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.  Reduited  (Stamped)	Manager of Regulatory Services	I certify that the statemen I acknowledge that any ki both under applicable law	ts I have made on this i	form and all atta iding statement	tion chments thereto an may be punishable	e true, accurate a	and complete.		6. Date App	lication
Manager of Regulatory Services		4. Typed Name 5. D			Manager of F 5. Date	nager of Regulatory Services				



## **NOTIFICATION**

JUL - 9 1999





Contains xylene ragge arromatic petroleum solvent.

## KEEP OUT OF REACH OF CHECKEN WARNING

See next page ser additional Precautionary Statements and Full Directions for Use.



READ THE ENTIRE LABEL FIRST.
OBSERVE ALL PRECAUTIONS
AND FOLLOW DIRECTIONS
CAREFULLY.

#### PRECAUTIONARY STATEMENTS

### HAZARDS TO HUMANS AND DOMESTIC ANIMALS

WARNING: Harmful if swallowed. Avoid breathing spray mists or vapera. Avoid contact with skin. Thoroughly wash after partiting and before eating or smoking. Avoid contamination of feed and toodstuffs. Do not treat great frequented by children and do not allow children in treated area until the spray has dried. Do not apply this product in such a manner as to directly or through drift expose warkers of other persons. The area, being treated must be vacated by unprotected persons.

#### STATEMENT OF PRACTICAL TREATMENT

IF SWALLOWED: Call a physician or Poison Control Center immediately. Contains petroleum solvent. Do not induce vomiting because of danger of aspirating liquid into lungs, causing serious damage and chemical pneumonitis. If spontaneous vomiting cocurs, keep head below hips to prevent aspiration, and monitor for breathing difficulty.

IF IN EYES: Flush eyes with plenty of water. Get medical attention.

IF ON SKIN: Remove contaminated clothing and wash affected area with soap and water. Get medical attention if irritation persists.

IF INHALED: Remove victim to fresh air and apply artificial respiration if indicated. Get medical attention.

NOTE TO PHYSICIAN: Malathion upon repeated, prolonged or careless exposure may cause cholinesterase inhibition. Atropine is antidotal. Arghāfic solvent may present aspiration hazaru Gastric lavage is indicated if product was swallowed.

#### ENVIRONMENTAL PAZARDS

This posticide is toxic to fish, aquatio invertebrates, and aquatic life stages of amplibians. For terrestrial uses, do not apply directly to water, or to areas where sufface water is present or to intestidal areas below the mean high water mall. Diff and runoff may be hazardous to aquatic organisms in areas near the application site. Do not contaminate water when disposing of equipment washwater.

This product is highly toxic to bees exposed to direct treatment on blooming crops or weeds. Do not apply this product or allow it to drift to blooming crops or weeds if bees are visiting the treatment area.

PHYSICAL OR CHEMICAL HAZARDS

Do not use, pour, spill, or store near heat or open flame.

#### DIRECTIONS FOR USE

It is a violation of Federal law to use this product in a manner inconsistent with its labeling.

Not for use on plants being grown for sale or other commercial use, or for commercial seed production, or for research purposes. For use on plants intended for aesthetic purposes, ornamental gardens or pages, or oe golf courses or tawns and grounds.

### STORAGE & DISPOSAL

STORAGE: Store in original container in a locked storage area indicessible to children and domestic animals.

PESTICIDE DISPOSAL: Securely wrap container in several layers of newspaper and discard in trash.

CONTAINER DISPOSAL: Do not reuse container. Rinse thoroughly before discarding in trash.

\* K

Table 1. (Continued)						
Site	Pests	Amount in 1 Gallon of Water	Days to Harvest <sup>(1)</sup>			
Flowers, Ornamentals, Shrubs	Oyster Sheli Scale, Euonymus Scale	1 tsp.	_			
,	Aphids, White Fly Thrips, Mealy Bugs, Japanese Beetle (Adult), Four Lined Plant Bug, • Tarnssted Plant Bug, Rose Losflropper, Potato Leathopper	1½ tsp.				
• • •	Bagworms, Junioer Scale	2 tsp.				
:	Son Brown Scale					
	Pine Needle Scale	1° 436	<b>i</b> 1			

Comments: Apply if summer when infestation occurs. Repeat in 10 to 12 days. For scales apply when crawlers have settled employings.

injury may occur on Ferns, Hickory, Viburnum, Lantana. Crassula and Canareti Juniper. Slight injury has also been reported on Boston Fern, Plante, Fern, Malicenhair Fern, Petunia, Small leaf Spirea, White Sign, and Maples.

MOSQUITOES, FLIES AND OTHER SMALL FLYING INSECTS OUTDOORS: Use 11 tablespoons per gallon of water, fuel oil, or diesel oil and spray yard, patio or other outdoor area using a fine mist spray. Repeat as needed. Do not apply oil solutions to ornamentals, injury may occur. Do not contaminate foods, dishes, or utensiis.

Table 2. Outdoor domestic uses - mosquitoes, flies and other flying insects outdoors for yards, lawns and recreational areas.

Site	Pests	Amount Per Ballon(1)
Yards, Lawns, Recreational Areas (Outdoors Only)	Mosquitoes, Nebult Flies	11 Tablespoons

Comments: Apply as a 190 or spray. Repeat as gogded, Do not apply oil solutions to ornamental species assinjury-may occur. Apply around value, holdes, walls and fences.

Water, fuel oil, or deset oil may be used as the carrier \*\*\*

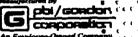
# LIMITED WARRANTY

The manufacturer warrants only that the chemical composition of this product conforms to the ingredient statement given on the label, and that the product is reasonably suited for the labeled use when applied according to the Directions for Use.

THE MANUFACTURER NEITHER MAKES NOR INTENDS ANY OTHER EXPRESS OR IMPLIED WARRANTIES, INCLUDING ANY WARRANTY OF MERCHANTABILITY OR FIT-NESS FOR A PARTICULAR PURPOSE, WHICH ARE EXPRESSLY DISCLAIMED. This limited warranty does not extend to the use of the product inconsistent with label instructions, warnings or cautions, or to use of the product under abnormal conditions such as drought, excessive rainfall, tomadoes, hurricanes, etc. These factors are beyond the control of the manufacturer or the seller. Any damages arising from a breach of the manufacturer's warranty shall be limited to direct damages, and shall not include indirect or consequential damages such as loss of profits or values, except as otherwise provided by law.

The terms of this Limited Warranty and Disclaimer cannot be varied by any written or verbal statements or agreements. No employee or agent of the seller is authorized to vary or exceed the carns of this Lincited Warranty and Disclaimer in any manner.

893/397 (4/2021195 .... EPA REG. NO. 33955-394 EPA EST. NO. 2217-KS-1



1217 West 12th Street Kamsas City, Missouri 64101 STOP! READ THE ENTIRE LABEL. soap and water. Get medical atten-FIRST. OBSERVE ALL PRECAUTIONS AND FOLLOW DIRECTIONS CAREFULLY.

#### PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC AMBRALS

WARKING: Harmful if swallowed. Avoid branthing spray mists or vapers. spray has dried. Do not apply tale a lambus open flore. product in such a manner as to directly or through drift expend workers or other persons. The area of the persons in a manner inconsistent treated must be vacated by product in such a manner as to . DIRECTIONS FOR USE

.....

\*\*\*\*

....

PRACTICAL THEATMENT occurs, keep head below hips to pri

MOTE TO PHYSICIAM: Malathion upon repeated, prolonged or careless exposure may cause cholinesteras inhibition, Atropine

IF IMMALED: Remove victim to

fresh air and apply artificial respira-tion if Indicated, Get medical

tion if irritation persists.

is antidotal. Aromatic solvent may present aspiration bazard. Sastric

PHYSICAL CO.

Peses, Ornamental gardens or

893/399 AP121195 EPA REG. NO. 33955-394

F III ETEX: Husb eyes with plenty of water can medical attaction.

IF ON SIGN. Remove contaminated clothing and wash affected area with

<sup>(&</sup>quot;Days to harvest refers to the interval or the number of days before harvest for the last application of