SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature Comparison Date of Delivery
Article Addressed to:	
PETERS USED EQUIPMENT INC 5507 U.S ROUTE 6 PEMBERVILLE, OHIO 43450	
Al	3. Service-Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
06-275- TR-UNC	4. Restricted Delivery? (Extra Fee)
Article Number 7002 24 (Transfer from service label)	10 0000 1633 4629
PS Form 3811, August 2001 Domestic Ret	urn Receipt 102595-01-M-2509