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 X B. Received by (Printed Name) C. Dale of Del very D. Is delivery address different from item 1?
1. Article Addressed to: Hon. Dee Rodi-Barbera Mayor and Clerk of Council	If YES, enter delivery address below: EJ No
Village of Dalton 2 W. Main St. Dalton, OH 44618	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7007 2680 0001	0490 9373

Domestic Return Receipt

102595-02-M-#540

PS Form 3811, February 2004

United States Postal Service		First-Class Mail Postage & Fees Paid USPS Permit No. G-10
• Sender: Please print your name print your na	OIHE O NOISSIMM	RESERVED-DOCKETING DIV
67-829 klahiladdadhha 830 830	المطاعلية الماليسطيلات المالي	hl

United States Postal Service