CENDED, COMPLETE THE SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. Article Addressed to: Mr. Kevin Benton 	A. Signature X. C. Agent Addressee B. Received by (Printed Name) C. Date of Delivery D is delivery address different from item 1? Yes If YES, enter delivery address below: U No
Mayor and Clerk of Council Village of Leipsic 142 E. Main Street Leipsic, OH 45856	3. Service Type Certified Mail Express Mail Registered Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
	101. D490 9243

Domestic Return Receipt

102595-02 M 1540

(Transfer from service la_______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,	2.75 2.75 2.75	this box •
FURING UTILITIES CO DEN A 64 LAD STREE EDILO LAMB, OHIO 4,048-8703 DACKETING DIVISION		EINFO-DOCKELIAS GIA
07-829 836lahdhaldadhhladh 831	alldaalldaldaldadd	

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