

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Addressee's name and complete address:</p> <p>DONAHUE, KERRY ATTORNEY AT LAW</p> <p>BELLINGER 7 DONAHUE</p> <p>6295 EMERALD PARKWAY</p> <p>DUBLIN, OH 43016</p> <p>06-1311-TR-CVF</p>		<p>A. Signature</p> <p>X</p> <p><input type="checkbox"/> Agent</p> <p><input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name):</p> <p>C. Date of Delivery:</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes</p> <p>E. If Yes, enter delivery address: <input type="checkbox"/> No</p> <p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number</p> <p>(Transfer from service label) 7001 2510 0004 7177 0769</p>			