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.
- 1. Article Addressed to:

OHIO LOGISTICS 2001 INDUSTRIAL DR. FINDALY OH 45840

COMPLETE THIS SECTION ON DELIVERY A. Signature Agent □ Addressee C. Date of Delivery B. Received by (Printed Name) D. Is delivery address different from item ∑ Yes If YES, enter delivery address below: JUL -7 9 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes

08-751-TR. CKE 2. Article Number (Transfer from service label)

ոոո4 7001 2510

PS Form 3811, February 2004

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

