## SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address differed when Article Addressed to: If YES, enter delivery address below: BEAVER PETROLEUM CO 1507 WAYNESBURG DRIVE SE P.O. BOX 20308 3. Sepvice Type CANTON OH 44701-0308 Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise 08-571-TA-CUF Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7007 0220 0000 2272 5671 (Transfer from service label)

Domestic Return Receipt

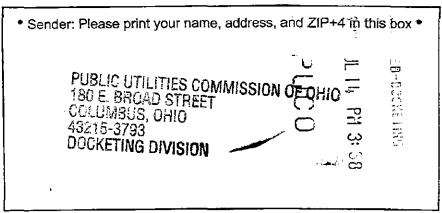
102595-02-M-1540

PS Form 3811, February 2004

United States Postal Service



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



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