The state of the s	
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. Sum Agent Addressee B. Received by (Printed Marne) C. Date of Delivery PRUCE Henry 1-10-13
1.⁄ Article Addressed to:	D. Is delivery address different from Item 117 U Yes If YES, enter delivery address below. U No
Fred Stitsinger Hanover Township Board of Trustees 2595 Old Oxford Road	PUC
Hamilton, Ohio 45013	3. Service Type
12-1682-EL-AIR	4. Restricted Delivery? (Extra Fee)
2. Ar. 7007 2680 0001 0485 8	1961

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1340