SENDER: COMPLETE THIS SE	CTION		COMPLET	E THIS SE	CTION ON DEL	LIVERY
 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: Pike Township (Clark County, Oh) Scott Belcastro 		A. Signature X B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 1?				
		Oh)	If YES,	enter delive	ery address belo	W: 5500
4067 Treeline Ct Westerville, OH 4308	32		☐ Regi	Type fied Mail stered red Mail	☐ Express Ma	ail ceipt for Merchandise
			4. Restrict	ed Delivery	? (Extra Fee)	☐ Yes
Article Number (Transfer from service label)	7007	5F90	0001	0486	6690	
PS Form 3811, February 2004	Dom	estic Retu	rn Receipt		34 M	702595-02-M-1540

United States Postal Service		First-Class Mail Postage & Fees Pai USPS Permit No. G-10
Sender: Please print your in the sender: Please print your in the sender.	name, address, and ZIP	+4 is this box •
The Public Utilitie 180 E. Broad Stre Columbus, OH 43		16.24 PH 1:09
This is to certify that the accurate and complete reproduction document desivered in the	production of a ca	196 11 6

Technician Date Processed 8/24/16

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 Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes/52
Article Addressed to:	D. Is delivery address different from item 1? Yes / / / If YES, enter delivery address below:
Bethel Township (Clark County, OH Scott Belcastro 4067 Treeline Ct Westerville, OH 43082	Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
<u></u>	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7007 2680 (Transfer from service label)	0001 048F F49 Q 33
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

			- ca _e			
SENDER: COMPLETE THIS SECTION		COMPLET	TE THIS SE	CTION ON	DELIVEI	RY
 Complete items 1, 2, and 3. Also completitem 4 if Restricted Delivery is desired. Print your name and address on the reverso that we can return the card to you. Attach this card to the back of the mailpiper on the front if space permits. 	rse !	Jeff	1/2 ed by (Prin: SEA	1AK_		☐ Agent ☐ Addressee Date of Delivery
Article Addressed to:				different from ery address i		□ No
Energy Deals, LLC David Ramos 33730 Lear Industrial Pkwy Avon, OH 44011		Reg	tified Mail		Receipt	for Merchandise
-			red Mail ted Delivery	☐ ;; 0.D. ? (Extra Fee	77.00	☐ Yes
2. Article Number 7014	5750	0001	5270	8265		
PS Form 3811, February 2004 Do	omestic Retu	ırn Receipt				102595-02-M-1540

was as	· · · · · · · · · · · · · · · · · · ·
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 Agent Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
1. Article Addressed to:	If YES, enter delivery address below:
The Great Lake Port Corporation Terry Feichtenbiner 213 Diana Dr	2 U C
Poland, OH 44514	3. Service Type Certified Matt Express Mail Registered Refurn Receipt for Merchandise Insured Mail
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7007 c	2680 0001 0486 6560
PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-1540

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. 1. Article Addressed to: 	A. Signature Agent Addressee 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: No
Patriot Energy Consultants, LLC Jason Lemmon 1444 Alphada Ave #A13 Akron, OH 44310	3. Sevice Type Certified Mail Poress Mail Registered Return Receipt for Merchandise C.O.D. Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service labe) 7007 2680	0001 0486 6713
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540 }

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVE	RY
 ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the revisor that we can return the card to you. ■ Attach this card to the back of the mailpor on the front if space permits. 1. Article Addressed to: 	erse	A. Signature X B. Received by (Printed Name) C. DALY D. Is delivery address different from Item 1 If YES, enter delivery address below:	☐ Agent ☐ Addressee Date of Delivery ? ☐ Yes ☐ No
Village of Richwood, OH Charlene Rericha 341 White Pond Dr		3. Service Type	
Akron, OH 44320		☐ Certiffed Mall ☐ Express Mall ☐ Registered ☐ Return Receipt ☐ Insured Mail ☐ C.Ö.D. ☐	for Merchandise
		4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number 70 (Transfer from service label)	07 268	0 0001 0486 6348	
PS Form 3811, February 2004	omestic Ret	urn Receipt	102595-02-M-1540

SENDER: COMPLETE THIS SECTION	N	COMPLETE	THIS SECTION ON L	DELIVERY
 Complete items 1, 2, and 3. Also co item 4 if Restricted Delivery is desire. Print your name and address on the so that we can return the card to you. Attach this card to the back of the ror on the front if space permits. Article Addressed to: 	ed. reverse u.	DARY D. Is delivery	by (Printed Name)	☐ Agent ☐ Address C. Date of Delive
Smith Township Rich, Benjamin 341 White Pond Drive Akron, OH 44320		3. Septice T	ype C 22 ype C Mail C Return Return	Mail Receipt for Merchandi
Article Number (Transfer from service label)	7014 2	750 0007	2561 7151	

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. 1. Article Addressed to: 	A. Signature X 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: No	
Pleasant Township Rich, Benjamin 341 White Pond Drive Akron, OH 44320	3. Service Type Certified Mail Registered Insured Mail Co.D.	
	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service labs 7007 2680	0001 0486 6683	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. Print your name and address on the reso that we can return the card to you. Attach this card to the back of the maior on the front if space permits. Article Addressed to: Village of Chippewa Lake Rich, Benjamin 341 White Pond Drive Akron, OH 44320 	everse X Addressee B. Received by (Printed Name) O. Date of Delivery
Article Number (Transfer from service label)	2002 5P90 0007 049P F404
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540

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
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Village of Green Camp Benjamin Rich	3. Service Type
341 White Pond Dr Akron, OH 44320	☐ Certified Mail ☐ Express Mailt ☐ Registered ☐ Refurn Receipt for Merchandise ☐ Insured Mail ☐ C. ☐
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7007 21	-80 0001 0486 6386
PS Form 3811, February 2004 Domestic F	leturn Receipt 102595-02-M-1540

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
1. Article Addressed to: Prairie Township Rebecca Pastier	D. Is delivery address different from item 1? If YES, enter delivery address below: No
341 White Pond Dr, B3 Akron, OH 44320	3. Sevice Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. Restricted Delivery? (Extra Fee)
2. Article Number 7007 258 (Transfer from service label)	10 0001 0486 FPP4
PS Form 3811, February 2004 Domestic Rel	turn Receipt 102595-02-M-1540

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. 1. Article Addressed to: Village of West Farmington Ohio Shirley McIntosh 251 Fourth St West Farmington, Ohio 44491 	A. Signature A. Signature Addressee B. Received by (Primed Name) C. Date of Delivery B. 12/2010 D. Is delivery address different from item 1? Yes If VES enter delivery address below: No No No No No No No
2. Article Number (Transfer from service label) 7007 2E	90 0001 0 45 P 2 300
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

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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 Agent Addressee B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
City of Delphos FERNANDEZ, EMILY	MED-DOG MUG 24 PUD
341 WHITE POND DRIVE, B-3 F AKRON, OH 44320	3. Sevice Type Cortified Meil Express Mail Registered Return Receipt for Merchandise Insured Mail G.e.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7007 2680 (Transfer from service label)	0001 0486 8670
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540,

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
Article Addressed to: Cardington Township (Morrow)	D. Is delivery address different mitem 1?
Lou D'Alessandris 341 White Pond Dr Akron, OH 44320	3. Sevice Type C Certified Mail Registered Insured Mail C.O.D. 3. Sevice Type Propriet Propriet Continued Mail C.O.D.
:	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7007 2680 (Transfer from service labe.	0001 0486 8946
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

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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. Article Addressed to: 	A. Si@ityrof Springdale x11700 Springfield Pike Springdale OH 45246 B. Received by (Printed Name) D. Is delivery address different from item 1? enter delivery address below: No
City of Springdale Hamilton County Derrick Parham 11700 Springfield Pike Springdale, OH 45246	sition delitory designed as the
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7007 2L4	0 0001 0486 8663
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540
<u> </u>	

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. Article Addressed to: 	A. Signature A. Agent Addresse B. Received by (Printet Name) C. Date of Deliver D. Is delivery address different from item 1?
Etna Township (licking County, Oh) Scott Belcastro	If YES, enter delivery address below: ORDER NO PM ORDER
4067 Treeline Ct Westerville, OH 43082	3. Service Type 12 Certified Mail 13 Express Mail 14 Registered 15 Return Receipt for Merchandisc
2. Article Number 7014 2	4. Restricted Delivery? (Extra Fee)
PS Form 3811, February 2004 Domestic Re	eturn Receipt

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
Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
Gateway Telecom, LLC Irvin III, Howard 1025 Main Street, Suite 900 Wheeling, WV 26003	1000 1000 1000
	3. Septice Type Certified Mail Registered Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7007 2L	80 0001 0486 0995
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540 s

A Company of the Comp	
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 reversor so that we can return the card to you. Attach this card to the back of the mailpor on the front if space permits. Article Addressed to: Franklin Township (Coshoctor) 	B Received by (Printed Name). C. Date of Delivery C. Date of Delivery D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No. ?
Scott Belcastro 4067 Treeline Ct	
Westerville, OH 43082	3. Septice Type Certified Mail Registered Insured Mail GO.D.
1	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	7014 2120 0001 2560 8197
PS Form 3811, February 2004 D	omestic Return Receipt 102595-02-M-1540

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. Article Addressed to: 	A. Signature X
German Township (Clark County, Ol- Scott Belcastro 4067 Treeline Ct Westerville, OH 43082	3. Service Type Certified Mail Sepress Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. Restricted Delivery? (Form Fee) Yes
2. Article Number 7007 25	80 0001 0486 0971
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

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. Signification of Addresses Agent Addresses Agent Addresses Agent C. Date of Deliver
Article Addressed to:	D. Is delivery address different from item 1? U Yes If YES, enter delivery address below:
Fair View Energy Inc Jay Snyder 7782 W Ridge Rd Fairview, PA 16415	3. Sen/ce Type Certified Mail Registered Insured Mail Insured Mail Co.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7014 2121	3 0901 2560 8227

1 American State of the State o	
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. Article Addressed to: Electric Choice, Inc	A. Signature X 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: No
Maxwell, Alexandra L 2443 Edgar St PITTSBURGH, PA 15210	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise C.O.D. 1. Restricted Delivery? (Extra Fee)
2. Article Number 7011 1570 (Transfer from service label)	0000 P75P P233
PS Form 3811, February 2004 Domestic Retu	urn Receipt: 102595-02-M-1540

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SENDER: COMPLETE THIS SECTION	COMPLETE *HIS 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 Agent Addressee Addressee B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Franklin Township (Coshocton Coun	ty 77 S
Scott Belcastro 4067 Treeline Ct	
Westerville, OH 43082	3. Septice Type Certified Mail Registered Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120 (Transfer from service label)	0001 2540 8180
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

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 Agent Addressee B. Received by (Printed Name) C. Date of Delivery Jan Agent C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
On-Demand Energy Inc Zbihley, John 500 Cherrington Parkway, Suite 400 Moon Township, PA 15108	Sevice Type Sevice Type Certified Mail Registered Insured Mail Recont Receipt for Merchandise
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7007 2580 01	007 0486 6674
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

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SENDER: COMPLETE THIS SECTION	COMPLETE THE 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
1. Article Addressed to: Medina County Runck, Marc 790 Windmiller Dr.	If YES, enter delivery address below: No 3. Service Type
790 Windmiller DT Pickerington, OH 43147	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Register for Merchandise ☐ Insured Mail ☐ C. ☐ . ☐ . ☐ . ☐ . ☐ . ☐ . ☐ . ☐ . ☐
2. Article Number 7007 2680 (Transfer from service label)	0001 0486 6805
PS Form 3811, February 2004 Domestic Re	tente Peceiph 1979 1979 1979 1979

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 SQN AGMICAY Agent Addressee B. Received by (Printed Name) C. Date of Delivery
. Article Addressed to:	D. Is delivery address different from item 1? '☐ Yes If YES, enter delivery address below: ☐ No
Sunstar C&E Services, LLC Sam Pernicano 24742 Winona Dearborn, MI 48124	AUG 24
	3. Service Type Cortified Mail Registered Return Receipt for Merchandise
	4. Restricted Delivery? (Extra Fee) Yes
Article Number (Transfer from service label) 7014 2120	0001 2561 7120

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. Article Addressed to: Chelsea Energy & Trading, Lingstein Etsler 5601 Gallery Park Dr 	D. Is delivery address different from item 1? \(\text{Yes} \) If YES, enter delivery address below: \(\text{No} \)
Ann Arbor, MI 48103	3. Service Type Certified Mall Registered Registered Insured Mall Restricted Delivery? (Extra Fee)
2. Article Number 700 (Transfer from service label)	7 2680 0001 0486 6 93 9
PS Form 3811, February 2004 Domes	stic Return Receipt 102595-02-10-1540

Taken A	(2) () () () () () () () () ()
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. 	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from tem 1.2 Yes If YES, enter delivery address below:
Sugar Creek Township (Tuscaraw Scott Belcastro 4067 Treeline Ct Westerville, OH 43085	Service Type Certified Mail
2. Article Number 7014 2120 (Transfer from service label)	0001 2561 7됞7 음
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE TP'S 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
Article Addressed to: Uhrichsville City Tuscarawas Co.	D. Is delivery address differentiation item 1? A yes If YES, enter delivery address below: Unity Ohio
Scott Belcastro 4067 Treeline Ct	C 24 P000
Westerville, OH 43082	3. Service Type
<u>:</u>	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7007 2680 0	001 0486 6492

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540 ;

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. Article Addressed to: Mad River Township (Clark County) Scott Belcastro 4067 Treeline Ct Westerville, OH 43082	A. Signature A. Signature A. Signature A. Agent Address: B. Received by (Pented Name) C. Date of Deliver D. Is delivery address different from item 1? If YES, enter delivery address below: No 3. Septice Type Certified Mail Registered Return Receipt for Merchandis Insured Mail C. D 4. Restricted Delivery? (Extra Fee)
2. Article Number 7007 26	80 0001 0486 6829

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. Article Addressed to: 	A. signature X
High Power Energy,LLC Dawn Lindsey	JC O C PR + 22 PK - 22
3577 Commerce Dr Middletown, Ohio 45005	3. Septice Type ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120	0001 2561 8073
PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-1540

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. Article Addressed to: Village of Archbold Rich, Benjamin 341 White Pond Drive Akron, OH 44320	A. Signature X Agent Addresss B. Received by (Printed Name) C. Date of Delive D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Certified Mail Registered Return Receipt for Merchandis Insured Mail C. D. 4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7007 26	
0044 = .	eturn Receipt 102595-02-M-15

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
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Orange Township Scott Belcastro)-DOCKE
1680 E Orange Rd Lewis Center, Ohio 43035	3. Service Type Certified Mail Registered Insured Mail C.O.D.
i.	4. Restricted Delivery (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7007 2560	0001 0486 6607
PS Form 3811. February 2004 Domestic Re	turn Receipt 102595-02-M-1540