

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 Mouen Monski: Agent B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below:
Lake Tomahawk Property Owners Association 8853 Pontiac Trail Negley, OH 44441	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	LAD 0001 04 85 4055
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.

Technician ______ Date Processed _____ DEC 0 5 2016

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Complete items 1, 2, and 3. Print your name and 3. COMPLETE THIS SECTION COMPLETE THIS SECTION COMPLETE THIS SECTION
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Attach the can return
Print your name and address on the reverse or on the front is
So that we can return the card to you. Attach this card to the back of the mail. Union T. 2, and 3. COMPLETE THIS SECTION ON DELIVERY A. Signature X
OTHOR To The Depart "I'd Mailet
Attach this card to the back of the mailpiece, Union Township Attn: Clerk 4611 COURTY D
4611 County Road 17 WW-A JR D. Is delivery address different from 12 Chessen
P.O. Box 757 WW-A JR D. Is delivery address difference of Delivery
Chesan officer deliver.
P.O. Box 757 Chesapeake, Oh 4504
Chesapeake, OH 45619
9590 849
9590 9402 2329 6225 7409 92 3. Service Type Adult signature Adult signature
2. Article Number (Transfer from service lahel) 7.01.5 06.40 000000000000000000000000000000000
2. Article Number (Transfer Co.)
11 Co
7015 06 40 Priority Mail Expression of the Contilled Mail®
PS Form 3811, July 20.
PS Form 3811, July 2015 PSN 7530-02-000-9053
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Perry Township Attn: Fiscal Officer 7125 Sawmill Road Dublin, OH 43016-9018 NG-907-WW-AIR	D. Is delivery address different from item 1? ☐ Yes if YES, enter delivery address below: ☐ No					
9590 9402 2329 6225 7409 78	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Defivery ☐ Certified Mail® ☐ Certified Mail Restricted Defivery ☐ Certified Mail Restricted Defivery ☐ Collect on Delivery ☐ Collect on Delivery					
2. Article Number (Transfer from conden labor) 7016 2140/ AACH! APPRILIE	Collect on Delivery Restricted Delivery. Signature Confirmation Signature Confirmation Restricted Delivery					
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt					

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Article Addressed to:	. 0	D. Is delivery address different from item 19 If YES, enter delivery address below: 3130 E, Ma				□ No .
Kingsville Township Attn: Clerk		Kingsville Oh 44048				
5450 Dibble Road Kingsville, OH 44048	_	☐ Reg	e Type tified Mail gistered ured Mail	☐ Expre	n Receipt f	or Merchandise
16-907-WW-AIR			ted Deliver			☐ Yes
Article Number (Transfer from service label)	7007	2680	0007	0486	7178	
PS Form 3811, February 2004	Domestic Retu	ırn Receipt				102595-02-M-1540