CENDED: COMPLETE THE 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 Agent Agent Addressce B. Received by (Printed Name) C. Date of Delivery Many L. F. En. W. L. B. W. 17 D. Is delivery address different from the 17 If YES, enter delivery address below:
201 East Sst. Cleveland, Cith Trick	3. Service Type Certified Mail Express Mai Registered Return Receipt for Merchand se
57-691-GA-CON S.	4. Restricted Delivery? (Extra Fee)

Domestic Return Receipt

7002 2410 0000 1650 2011

102595-1.5M-1530

2. Article Number

(Transfer from service label)
PS Form 3811, February 2004