	<u> </u>
SENDER: COMPLETE THIS SECTION	SOMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A Signature
Print your name and address on the reverse	X Agent
Attach this card to the back of the resistance	B. Received by (Printed Meme) C. Dottofet Batt.
of of the front if space permits.	MAIC7 KEDIL 12/507
Article Addressed to:	D. Is delivery address different from item 1? (1) Yes If YES, enter delivery address below: 1) No
İ	11 123, eraer delivery address below:
The Honorable Thomas II Alassa	92J
The Honorable Thomas H. Nagel City of Fairborn	
44 W. Hebble Avenue	3C Sepres Type
Fairborn, OH 45324	Certified Mail D Express Mail
	☐ Return Receipt for Merchandise
2. Article Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label) 7007 2681	0 0001 0491 7323
PS Form 3811, February 2004 Domestic Retu	
	The second secon
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X Y (Chelle Yells - Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits.	D. Is delivery address different from item 1? Yes
1. Article Addressed to:	If YES, enter delivery address below: D No
The Honorable Courses 4	
The Honorable Stewart L. Zody Village of Loudonville	
522 N. Union Street	3. Service Type Certified Mall Express Mail
Loudonville, OH 44842	☐ Registered ☐ Return Receipt for Merchandise
<u> </u>	Insured Mali C.O.D. 4. Restricted Delivery? (Extra Fee)
2. Article Number	
(Transfer from service label) 7007 2680	0001 0491 6999
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	* Dama Engelbord Bagent
so that we can return the card to you. Attach this card to the back of the mailplece,	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits.	D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:
ENGELBARDT, JAROSLAW	
2608 RAMON DR) ::
BLAKESLEE PA 18610	
_ '	3. Service Type Certified Mail Express Mail
	Registered Return Receipt for Merchandise
07-11111 -0 1118	insured Mail C.O.D.
07-1141.TR.CVF	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7001 2510	0004 7177 0895
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

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