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 mailplece, or on the front if space permits. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery 12-7-07
	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to:	III I I I I I I I I I I I I I I I I I
M & C TRANSPORT INC.	PEC
JEFFREY W. CRUM	
39830 BARNESVILLE-BETHESDA	KD
BETHESDA,OH 43719	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? Textra Fee
07-1188-TR.CVF	
2. Article Number 7001 251 (Transfer from service label)	
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-154
FG (OIII (OO) . 1,	