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
Article Addressed to:	D. Is delivery address different from iten_1?
WILLOW CREEK FARMS 69616 VINEYARD RD	
ST. CLAIRVILLE OH 43950 08-1023-TR-CVF	3. Service Type Certified Mall Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra See)
2 Article Number	4. Restricted Delivery? (Extra Gee) : D Yes 680 0001 0484 6692
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540