

FILE

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 <i>Ernest L. Noah</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) ERNEST L. NOAH ☐ Restricted Delivery C. Is delivery address different from item B? If YES, enter delivery address below: ☐ Yes ☒ No D. Is delivery address different from item B? If YES, enter delivery address below: ☐ Yes ☒ No 3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
1. Article Addressed to: NOAH, E.L. 30 N. CEDAR STREET NEWARK OH 43055 10-408-TR-LVF		UCCO FEB 23 1987 NEWARK OH MARKETING DIV	
2. Article Number (Transfer from service label)		7007 2680 0001 0486 9363	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

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Technician 2 Date Processed MAR 25 2010