FILE	9590 9402 2329 6225 7402 82 7016 2140 0001 0285 7039 PS Form 3811, July 2015 PSN 7530-02-000-9053	CLERK OF COUNCIL VILLAGE OF MANCHESTER 806 LINDA VISTA DRIVE MANCHESTER, OHIO 45144	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. 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.	PS Form 3811, July 2015 PSN 7530-02-000-9053	1.A	MAYOR - CITY OF FOREST PARK 1201 W. KEMPER ROAD FOREST PARK, OHIO 45240	■ Complete items 1, 2, and 3. ■ 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.
	3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® □ Certified Mail® □ Certified Mail® □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Collect on Delivery Restricted Delivery □ Signature Confirmation ↑ Aail Restricted Delivery □ Signature Confirmation ↑ Aail Restricted Delivery □ Signature Confirmation ↑ Bestricted Delivery □ Signature Restricted Delivery □ Signature Confirmation ↑ Bestricted Delivery □ Signature Restricted Delivery □ Signature Confirmation ↑ Bestricted Delivery □ Signature Restricted Delivery □ Signature Confirmation ↑ Bestricted Delivery □ Signature Confirmation	TOMES, enter delivery address below:	字(0)	Domestic Return Receipt	Service Type Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Collect on Delivery Restricted Delivery iii Restricted Delivery	If YES, enter delivery addrass below: M No If YES, enter delivery addrass below: M No O O O O O O O O O O O O O	Signature Signat
fred to the	9590 94027901 6104 7609 13 7016 2140 0001 0285 71. PS Form 3811, July 2015 PSN 7530-02-000-9053	MAYOR - VILLAGE OF MANCHESTER 80% INDA VISTA DRIVE MANCHESTER, OHIO 45144	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. 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.	PS Form 3811, July 2015 PSN 7530-02-000-9053	9590 9402 1901 6104 7612 62 7016 2140 0001 0285 5721	1. Article Addressed to: 17.32 WEST CHESTER TOWNSHIP BOARD OF TRUSTEES 9113 CINCINNATI-DAYTO - OAD WEST CHESTER, OHIO 45/65	Complete items 1, 2, and 3. Complete items 1, 2, and 3. 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.
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It / Is delivery address different from them 1?	1. Article Addressed to: 17.32 MONTGOMERY COUNTY COMMISSIONERS MEMBERS 451 W. THIRD STREET P.O. BOX 972 DAYTON, OHIO 45422	D. Is delivery address different from item 1?	1. Article Addressed to: 17-39 LEMON TOWNSHIP BOARD OF TRUSTEES 274 SCOTT ALAN DRIVE MONROE, OHIO 45050
X A Signature Agent Agent Address B. Received by (Printed Name) C. Date of Delive	 Complete items 1, 2, and 3. 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) A. Signature) A. Agent A. Addressee B. Received by (Printed Name) C. Date of Delivery	 Complete items 1, 2, and 3. 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.
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A. Signature X	 Complete items 1, 2, and 3. 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	Complete items 1, 2, and 3. 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.
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Received by (Printed Name) Same Sing Sp.	 Complete items 1, 2, and 3. 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. 	200	 Complete items 1, 2, and 3. 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.
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E- 1301		1-3 PM	TRUSTEES 9323 UNION CEMETERY ROAD LOVELAND, OHIO 45140
D. Is delivery address different from item 17 L1 vss TYES, enter delivery address below: No	1. Article Addressed to:	D. Is delivery address different from item 1?	1. Article Addressed to: 19.33
B. Received by (Printed Name) SOUZ SNOW Address:	 Complete items 1, 2, and 3. 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. M. L.	 Complete items 1, 2, and 3. 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.
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