

FILE
2017 DEC -4 PM 2:50
PUCO

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.

1. Article Addressed to:

SALLY BRIGGS, CLERK
VILLAGE OF HOLGATE
327 RAILWAY AVE.
P.O. BOX 217
HOLGATE, OH 43527

17-1134



9590 9402 3426 7227 7272 56

7011 1570 0000 6126 9268

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Sally Briggs

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

Sally Briggs

C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes
- If YES, enter delivery address below: ☐ No

HOLGATE, OH 43527
NOV 28 2017

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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.

1. Article Addressed to:

WALLACE SNYDER, MAYOR
VILLAGE OF HOLGATE
327 RAILWAY AVE.
P.O. BOX 217
HOLGATE, OH 43527

17-1134



9590 9402 3426 7227 7272 63

7011 1570 0000 6126 9251

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Sally Briggs

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

Sally Briggs

C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes
- If YES, enter delivery address below: ☐ No

HOLGATE, OH 43527
NOV 28 2017

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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.

1. Article Addressed to:

ANDREA GLECKLER, MAYOR
VILLAGE OF LYONS
126 W. MORENCI ST.
LYONS, OH 43533

17-1134



9590 9402 3426 7227 7272 01

7011 1570 0000 6126 9305

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Andrea Gleckler

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

Andrea Gleckler

C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes
- If YES, enter delivery address below: ☐ No

11-28-17

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.
Technician Re Date Processed 12-4-17

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.

Article Addressed to:

G. JEFF BRUBAKER, MAYOR
VILLAGE OF HAMLER
871 E. HUBBARD ST.
HAMLER, OH 43524



9590 9402 3426 7227 7273 00

Article Number (Transfer from outside label)

7011 1570 0000 6126 9213

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☒ Agent ☐ Addressee
B. Received by (Printed Name) *[Signature]* C. Date of Delivery *11-28-17*
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

Box 435

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

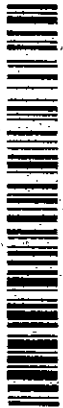
Domestic Return Receipt

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.

Article Addressed to:

KIM GRIME, CLERK
VILLAGE OF WEST UNITY
224 W. JACKSON ST.
P.O. BOX 207
WEST UNITY, OH 43570



9590 9402 3426 7227 7269 38

Article Number (Transfer from outside label)

7011 1570 0000 6126 9589

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☒ Agent ☐ Addressee
B. Received by (Printed Name) *[Signature]* C. Date of Delivery *11-28-17*
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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.

Article Addressed to:

SALLY MCEWEN, CLERK
VILLAGE OF LIBERTY CENTER
110 EAST ST.
LIBERTY CENTER, OH 43532



9590 9402 3426 7227 7272 18

7011 1570 0000 6126 9312

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☒ Agent ☐ Addressee
B. Received by (Printed Name) *[Signature]* C. Date of Delivery *11-27-17*
D. Is delivery address different from item 1? ☒ Yes ☐ No
If YES, enter delivery address below:

P.O. Box 92
Liberty Center OH
43532

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

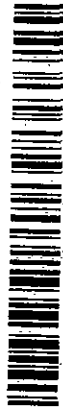
Domestic Return Receipt

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.

Article Addressed to:

KARLA SEXTON, CLERK
VILLAGE OF SWANTON
219 CHESTNUT ST.
SWANTON, OH 43558



9590 9402 3426 7227 7269 76

7011 1570 0000 6126 9541

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☒ Agent ☐ Addressee
B. Received by (Printed Name) *[Signature]* C. Date of Delivery *11-27-17*
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
LUANN OHARA, CLERK
VILLAGE OF LYONS
126 W. MORENCI ST.
LYONS, OH 43523

2. Article Addressed to:
KARIN SAUERLENDER, CLERK
VILLAGE OF FAYETTE
125 W. MAIN ST.
FAYETTE, OH 43521

3. Service Type
☒ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

5. PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Angela M. Smith

C. Date of Delivery
11-28-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

3. Service Type
☒ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

5. PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
DAVID BORER, MAYOR
VILLAGE OF FAYETTE
125 W. MAIN ST.
FAYETTE, OH 43521

2. Article Addressed to:
KARIN SAUERLENDER, CLERK
VILLAGE OF FAYETTE
125 W. MAIN ST.
FAYETTE, OH 43521

3. Service Type
☒ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

5. PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Angela M. Smith

C. Date of Delivery
11-28-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

3. Service Type
☒ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

5. PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Angela M. Smith

C. Date of Delivery
11-28-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

3. Service Type
☒ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

5. PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Angela M. Smith

C. Date of Delivery
11-28-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

3. Service Type
☒ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

5. PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to: STEVEN YAGELSKI, MAYOR
VILLAGE OF MONTEPELIER
211 N. JONESVILLE ST.
P.O. BOX 148
MONTEPELIER, OH 43543

2. Article Addressed to: 9590 9402 3426 7227 7271 40

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Steve Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: STEVEN YAGELSKI, MAYOR
VILLAGE OF MONTEPELIER
211 N. JONESVILLE ST.
P.O. BOX 148
MONTEPELIER, OH 43543

2. Article Addressed to: 9590 9402 3426 7227 7271 40

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Steve Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to: SHAWN CLARK, MAYOR
VILLAGE OF HOLIDAY CITY
13918 B COUNTY RD. M
HOLIDAY CITY, OH 43543

2. Article Addressed to: 9590 9402 3426 7227 7272 49

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Shawn Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: BECKY SEMER, CLERK
VILLAGE OF MONTEPELIER
211 N. JONESVILLE ST.
P.O. BOX 148
MONTEPELIER, OH 43543

2. Article Addressed to: 9590 9402 3426 7227 7271 33

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Shawn Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to: KATHY HUNER, MAYOR
CITY OF WAUSEON
230 CLINTON ST.
WAUSEON, OH 43567

2. Article Addressed to: 9590 9402 3426 7227 7269 69

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Shawn Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: KATHY HUNER, MAYOR
CITY OF WAUSEON
230 CLINTON ST.
WAUSEON, OH 43567

2. Article Addressed to: 9590 9402 3426 7227 7269 69

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Shawn Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to: BECKY SEMER, CLERK
VILLAGE OF MONTEPELIER
211 N. JONESVILLE ST.
P.O. BOX 148
MONTEPELIER, OH 43543

2. Article Addressed to: 9590 9402 3426 7227 7271 33

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Shawn Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

8. Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to: BECKY SEMER, CLERK
VILLAGE OF MONTEPELIER
211 N. JONESVILLE ST.
P.O. BOX 148
MONTEPELIER, OH 43543

2. Article Addressed to: 9590 9402 3426 7227 7271 33

3. Service Type: ☒ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature: ☒ Agent
☐ Addressee

5. Received by (Printed Name): *Shawn Stahler*

6. Date of Delivery: 11/23/17

7. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

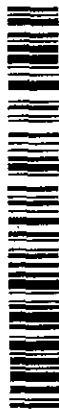
8. Domestic Return Receipt

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.

1. Article Addressed to:

17-1139
JERRY ROHRS, MAYOR
VILLAGE OF MALINTA
103-1/2 TURKEYFOOT AVE.
MALINTA, OH 43535



9590 9402 3426 7227 7271 88

2. Article Number (Transfer from previous form)

7011 1570 0000 6126 9336

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent ☐ Addressee

B. Received by (Printed Name) *Deborah* C. Date of Delivery *11-22-17*

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Priority Mail Express®

Domestic Return Receipt

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.

1. Article Addressed to:

17-1139
Ohio Gas Company
Charles Turney
200 W. High St.
P.O. Box 628
Bryan, Ohio 43504



9590 9402 3426 7227 7268 91

2. Article Number (Transfer from previous form)

7011 1570 0000 6126 9169

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent ☐ Addressee

B. Received by (Printed Name) *Charleen Hooser* C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Priority Mail Express®

Domestic Return Receipt

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.

1. Article Addressed to:

17-1139
 PEGGY BERNATH, MAYOR
 VILLAGE OF WEST UNITY
 224 W. JACKSON ST.
 P.O. BOX 207
 WEST UNITY, OH 43570



9590 9402 3426 7227 7269 45

7011 1570 0000 6126 9572

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Kim Grime

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Kim Grime

C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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.

1. Article Addressed to:

17-1139
 DOUGLAS G. JOHNSON, MAYOR
 CITY OF BRYAN
 1399 E. HIGH ST.
 P.O. BOX 190
 BRYAN, OH 43506



9590 9402 3426 7227 7274 47

7011 1570 0000 6126 8001

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Bayless

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Bayless

C. Date of Delivery

11-27-17

- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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.

1. Article Addressed to:

17-1139
 DONALD L. ATKINSON, MAYOR
 VILLAGE OF WHITEHOUSE
 6925 PROVIDENCE ST.
 P.O. BOX 2476
 WHITEHOUSE, OH 43571



9590 9402 3426 7227 7269 21

7011 1570 0000 6126 9596

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x J. Gundy

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. Gundy

C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery