SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature	☐ Agent ☐ Addressee
	B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to:  VILLAGE OF LOWER SALEM  Salem Township  State Route 821  Lower Salem, OH 45745	D. Is delivery address different from If YES, enter delivery address to	
	3. Service Type  Adult Signature  Adult Signature Restricted Delivery  Certified Mail®  Certified Mail Restricted Delivery  Collect on Delivery  Collect on Delivery	
9590 9402 3426 7227 7401 49	□ Adult Signature     □ Adult Signature Restricted Delivery     □ Certified Mail®     □ Certified Mail Restricted Delivery     □ Collect on Delivery	□ Priority Mail Express®     □ Registered Mail™     □ Registered Mail Restricted Delivery     □ Return Receipt for Merchandise     □ Signature Confirmation™

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Technician Date Processed 7/19/19

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