

- 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 *J. Borng* Agent
 Addressee

B. Received by (Printed Name) *T. Borng* C. Date of Delivery *8/20/04*

1. Article Addressed to: *Q2CV491 # M*
Thomas Prater
#338-527
Chillicothe Courthouse
P.O. Box 5500
Chillicothe, Ohio
45601

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Nu (Transfer f) *7001 2510 0008 6348 6786*