	S SECTION	COMPLETE TH	IS SECTION ON DELI	VERY
Complete items 1, 2, and : item 4 if Restricted Deliver	3. Also complete	A. Received by	(Please Print Clearly)	
		Vintali	t 10 1/502	B. Date of Delive
so that we can return the can Attach this card to the back	ard to you.	C. Signature	1	12-12-
out to the Dac	K Of the mailning		1000	☐ Agent
E	1			Addrosse.
A	60		residifferent from item	17 Yes
7 惶	1	15/17	deliver address below:	
Vinnie W	ilson 😃	/ 6/4 4		1111
7923 Ram	bler Place	XX D	EC 16 2009	La
	i, OH 45231	Brown	14.00	
Cincinnat	1, 011 45231	KEGICAL	AL HEARING CE	RK
		PROME	NVIRONMENTAL	
TOUR		☐ Registered	Return Receipt	for Merchandise
TSCA-05-2008-	-0019	☐ Insured Mail	LI C.O.D.	
. Article Number		4. Restricted Deliv	ery? (Extra Fee)	☐ Yes
(Transfer from service label)	7001 0320	0006 0188		00
S Form 3811, March 2001			0802	