SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</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> <li>1. Article Addressed to:</li> <li>Michael Small 8044 Montgomery Road, Suite 710 Cincinnati, Ohio 45236</li> </ul>	A. Signature    Agent   Addressee     Addressee     B. Received by (Printed Name)   C. Date of Delivery   Addressee     Addresse
	4. Restricted Delivery? (Extra Fee)
2. Article Numb (Transfer fron 7004 2510 0006	9726 3659
PS Form 3811, February 2004 Domestic Retr	rum Receipt 102595-02-M-1540