









SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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 malipiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X Agent
1. Article Addressed to:	D. Is delivery accress different from item 1? Yes
Mr. Eric R. Fox , Attorney 1122 South State Street Post Office Box 710 Hart, Michigan 49420	JUL 0 1 2011
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2. Addict Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
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