

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ 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. 		<p>A. Signature X <i>Sarah P. Hee</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p><i>George T. Maier</i> <i>STARK COUNTY SHERIFF</i> <i>4500 ATLANTIC BLVD. N.E.</i> <i>CANTON, OH 44705</i></p>		<p>B. Received by (Printed Name) <i>S. Hill</i></p> <p>C. Date of Delivery <i>2-15-23</i></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 6549 1028 0822 49</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
<p>For delivery information, visit our website at www.usps.com®.</p> <p><i>Canton, OH 44705</i></p>	
<p>OFFICIAL USE</p>	
<p>Certified Mail Fee \$4.15</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$0.00</p> <p><input type="checkbox"/> Return Receipt (electronic) \$0.00</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$0.00</p> <p><input type="checkbox"/> Adult Signature Required \$0.00</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$0.00</p> <p>Postage \$2.94</p> <p>Total Postage and Fees \$10.44</p>	<p>Postmark Here</p> <p>FEB 13 2023</p> <p>02/13/2023</p>
<p>Sent to <i>George T. Maier / Stark County Sheriff</i> <i>4500 Atlantic Blvd. N.E.</i> <i>Canton, OH 44705</i></p>	
<p>PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p>	

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<p>1. Article Addressed to:</p> <p><u>Colonel Charles A. Jones</u> <u>1970 West Broad St</u> <u>Columbus, OH 43223</u></p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>9590 9402 6549 1028 0822 32</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$4.15	\$13.35
Extra Services & Fees (check box, add fee as appropriate)	\$0.00
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
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<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage \$2.94	
Total Postage and Fees \$10.44	
<p>Postmark Here</p> <p>FEB 13 2023</p> <p>02/13/2023</p>	
<p>Sent To <u>Colonel Charles A. Jones</u></p> <p>Street and Apt. No., or PO Box No. <u>1970 West Broad St</u></p> <p>City, State, ZIP+4® <u>Columbus, OH 43223</u></p>	
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<p>1. Article Addressed to:</p> <p><i>Mike DeWine</i> <i>Riffe Center, 30th Floor</i> <i>77 South High St.</i> <i>Columbus, OH, 43215</i></p>		<p>B. Received by (Printed Name) <i>Kevin Donohue</i></p> <p>C. Date of Delivery <i>2/22/23</i></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 6549 1028 0820 96</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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<p>Certified Mail Fee \$4.15</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$11.00</p> <p><input type="checkbox"/> Return Receipt (electronic) \$0.00</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$0.00</p> <p><input type="checkbox"/> Adult Signature Required \$0.00</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$0.00</p>	<p>Postmark Here</p> <p>FEB 13 2023</p> <p>02/13/2023</p>
<p>Postage \$2.94</p> <p>Total Postage and Fees \$10.44</p>	
<p>Sent To <i>Mike DeWine</i></p> <p>Street and Apt. No., or PO Box No. <i>Riffe Center, 30th Floor 77 South High St.</i></p> <p>City, State, ZIP+4® <i>Columbus, OH, 43215</i></p>	
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