

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

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**OFFICIAL USE**

8552 8845 1000 005E TTDL

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here  
**1:09-CV-468**  
**DOC. 249**  
**1/17/13**

Sent To **MUMIN ISRAFIL 289-920**  
 Street, Apt. No.,  
 or PO Box No. **POB 80033, 2001 E. CENTRAL AVE**  
 City, State, ZIP+4 **TOLEDO, OH 43608**

PS Form 3800, August 2006 See Reverse for Instructions