



Firm Mailing Book For Accountable Mail

Name and Address of Sender	Check type of mail or service ☐ Adult Signature Required ☐ Adult Signature Restricted Delivery ☐ Certified Mail ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery (COD) ☐ Insured Mail ☐ Priority Mail	☒ Certificate of Mailing ☐ Priority Mail Express ☐ Registered Mail ☐ Return Receipt for Merchandise ☐ Signature Confirmation ☐ Signature Confirmation Restricted Delivery	Affix Stamp Here (for additional copies of this receipt). Postmark with Date of Receipt. neopost SM 01/30/2024 US POSTAGE \$003.42⁰ ZIP 44308 041L12204455
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1 Addressee (Name, Street, City, State, & ZIP Code™) 2

CV-2016-09-3928
MELEAH SKILLERN
1375 E. 9th Street
Suite 2250
Cleveland, OH 44114

CV-2016-09-3928
MEMBER WILLIAMS
715 WOODCREST DR
Wadsworth, OH 44281

TANIA GALONSKI
2024 FEB -1 PM 12:41
SUMMIT COUNTY
CLERK OF COURTS

3 4

CV-2016-09-3928
MICHAEL R. SIMPSON
999 BRIGANTINE AVE
Uniontown, OH 44685

CV-2016-09-3928
MINAS FLOROS D.C.
AKRON SQUARE CHIROPRACTIC
1419 S ARLINGTON ST
Akron, OH 44306

5 6

CV-2016-09-3928
MONIQUE NORRIS
2321 19TH ST SW
Akron, OH 44314

CV-2016-09-3928
MRS INVESTIGATIONS LLC
999 BRIGANTINE AVE
Uniontown, OH 44685



Total Number of Pieces Listed by Sender	Total Number of Pieces Received at Post Office	Postmaster, Per (Name of receiving employee)
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