

Range 29 East | Range 30 East

- | | |
|------------------------------------|--------------------------|
| COG Operating | Southern Bay Energy LLC |
| Marbob Energy Corp | Southwest Royalties Inc. |
| Tandem Energy Corp | Lobos Energy Partners |
| Pioneer Natural Resources USA Inc. | ConocoPhillips Company |
| CBS Operating Corporation | Anadarko Prod Corp |
| Burnett Oil Co. Inc. | EOG Resources Inc. |

Affidavit of Publication

NO.

21379

STATE OF NEW MEXICO

County of Eddy:

Walter L. Green

Walter L. Green

being duly sworn, says that he is the Publisher
of the Artesia Daily Press, a daily newspaper of general
circulation, published in English at Artesia, said county
and state, and that the hereto attached

Legal Notice

was published in a regular and entire issue of the said
Artesia Daily Press, a daily newspaper duly qualified
for that purpose within the meaning of Chapter 167 of
the 1937 Session Laws of the state of New Mexico for

1 Consecutive weeks/days on the same

y as follows:

First Publication September 23, 2010Second Publication Third Publication Fourth Publication Fifth Publication

Subscribed and sworn to before me this

23rd day of September 2010



OFFICIAL SEAL
Danny Scott
NOTARY PUBLIC-STATE OF NEW MEXICO

My commission expires: 3/18/2014

Danny Scott

Danny Scott
Notary Public, Eddy County, New Mexico

Copy of Publication:

LEGAL NOTICE

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION
SANTA FE, NEW MEXICO

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 AM on October 14, 2010, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact Florene Davidson at 505-476-3458 or through the New Mexico Relay Network: 1-800-659-1779 by October 4, 2010. Public documents including the agenda and minutes can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:
All named parties and persons
having any right, title, interest
or claim in the following cases
and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

CASE 14558

Application of Marbob Energy Corporation for vertical expansion of the Burch Keely Unit, Eddy County, New Mexico. Applicant in the above-styled cause seeks an order amending Order No. R-7900-A to extend the vertical limits in the Burch Keely Unit to expand the Unitized Formation to 5000 feet. The Unit Area consists of lands in Sections 12, 13, 23 through 26 in Township 17 South, Range 29 East and Sections 18, 19 and 30 in Township 17 South, Range 30 East, NMPM, Eddy County, New Mexico. Said areas are located approximately 2 miles west of Loco Hills, New Mexico.

Given under the Seal of the State of New Mexico Oil Conservation Division at Santa Fe, New Mexico on this 21st day September 2010.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION
Mark E. Feamire, P.E. Director

Published in the Artesia Daily Press, Artesia, N.M. September 23, 2010. Legal No. 21379.

EXHIBIT A

**APPLICATION OF
MARBOB RESOURCES, INC.
TO EXPAND THE VERTICAL LIMITS OF THE BURCH KEELY UNIT
EDDY COUNTY, NEW MEXICO.**

Unit Interest Owners:

Pansam Trust Raymon Newton
Childress
PO Box 66
Joplin, MO 64802

Robert F. Dexter Trust UDT Date
8/27/92, Louise H. Dexter
20940 Pacific Coast Hwy
Malibu, CA 90265

William D. Inglehart
701 E. Pennsylvania
Escondido, CA 92025-3004

Sharon A. Hansen
5822 Jones Ave
Westminster, CA 92683

Donna K. Walls
616 El Cajon Blvd Ste B
PMB 253
San Diego, CA 92115

Beth J. Inglehart
5385 Hubbell Ct
Ventura, CA 93003

Hugh Ross Burch Trustee
Hugh R. Burch Rev Living Trust
4601 Memory Lane
Oklahoma City. OK 73112

Russell Resources Ltd.
Michael Russell Lilly VP
PO Box 373
Longview, TX 75606

Barbara Kruse Frankenfield
73333 Wooded Acres Trail
Mansfield, TX 76063

Marbob Energy Corp
PO Box 227
Artesia, NM 88211-0227

Jack W. McCaw
PO Box 127
Artesia, NM 88211-0127

Leo Vernon Mock Family Trust
Debbie Bowers &
286 StageCoach Rd.
Arroyo Grande, CA 94320

Chester J. Acree and Jean C.
Acree – Trustees of the Acree Family
Trust Dated 9-30-88
2604 Via Segunda
Palos Verdes Estates, CA 90274

Higgins Trust Inc.
PO Box 6905
Thomasville, GA 31758-6905

Carol Jean Dexter Purcell
5535 Ravia St.
Lakewood, CA 90713

Maryanne Kanani Lynn Blakely
1025 Bordner St.
Montpelier, OH 43543

Sandra Leigh Terry
PO Box 12617
El Paso, TX 79912

Susan Lynn Terry
7200 Montgomery NE #367
Albuquerque, NM 87109

Dolores J. Thomas
1045 La Reina
Lake San Marcos, CA 92078

Margaret Louise Treat
PO Box 20031
Billings, MT 59104

Kurt A. Weber
7631 Willis Ave
Van Nuys, CA 91405

Virginia Weber
7631 Willis Ave
Van Nuys, CA 91405

William C. White
15 Desert Flower Rd.
Artesia, NM 88210

EHW LLC
101 South Fourth St.
Artesia, NM 88210

Mary Kenney Gore
1729 Sabatini Drive
Henderson, NV 89052-4102

Willa Kathryn Kennedy Estate
Tanya Marie Mangum - Pers Rep
PO Box 1121
Edgewood, NM 87015

Jimmy R. McCutcheon
1503 Parker Drive
Odessa, TX 79761-1550

Lynn Barker
10915 Huston St #112

North Hollywood, CA 91601

Ocotillo Production LLC
1705 W Washington Ave
Artesia, NM 88210

Marshall & Winston Inc
PO Box 50880
Midland, TX 79710-0880

Pitch Energy Corporation
P.O. Box 304
Artesia, NM 88210

Costaplenty Energy Corp.
PO Box 1182
Artesia, NM 88211-1182

Sabine Royalty Trust Bank of
America NA
Escrow Agent-Sabine Royalty Tr.
Dallas, TX 75284-0887

Hugh Burch
3315 NW 63rd
Oklahoma City, OK 73116

Trust UW Francisca S Winston
c/o Meristem
Attn: L. Karls
601 Carlson PKWY Ste 800
Minnetonka, NM 55305

CQWE LLC Bob Acree Manager
PO Box 241826
Anchorage, AK 99524

Downer Family Trust 1991
Selma Downer-TTEE
21948 Marjoram Ct
Santa Clarita, CA 91350

Long Minerals Trust U/T/A 6/4/08
4189 Bellaire Blvd Ste 202
Houston, TX 77025-1045

Donna Finch Adams
PO Box 1025
Dennison, TX 75021

Gary Laird Finch Jr.
PO Box 12
Stowell, TX 77661

Juliette Rathbone Finch Family
Trust Johnny Walker Finch Trustee
PO Box 2395
Kerrville, TX 78029-2395

Dexter Family Trust DTD
3/31/2009 Robert & Hadiya
Dexter Trustees
9262 Irongate Lane
San Diego, CA 92126

Minerals Management Service
PO Box 5810 TA
Denver, CO 80217-5810

Selma E Andrews Trust F/B/O
Peggy Barrett
Bank of America NA TTEE
PO Box 840738
Dallas, TX 75284-0738

Selma E Andrews Perpetual
Charitable Trust
Bank of America NA TTEE
PO Box 840738
Dallas, TX 75284-0738

D V LoFlin Jr.
PO Box 4987
Monroe, LA 71211

John Neal Lofline
162 Cottonwood
Uvalde, TX 78801

James Rankin
230 Taglewood LN
Levelland, TX 79336-6612

Mary K Rankin Elliott
104 Wood circle
Levelland, TX 79336

Robert R Purcell Family Trust
Darby C Ritter Trustee
2012 East 26th Street
Lawrence, KS 66046

Rosemary Leforce
715 Spring Lane
Bristow, OK 74010

Frank W Addis
97304 E Alhambra Rd
Kennewick, WA 99337-8800

Connie Alexander
8716 Warner Rd
Kernersville, NC 27284

Roy C Andrews
C/O J P Andrews
3113 79th St.
Lubbock, TX 79423-1823

Peggy Fallon Ashenbrenner
401 E 8th St Ste 214-348
Souix Falls, SD 57103

Betty Jean Banks
8688 East Easter Place
Centennial, CO 80112-1856

Braille Institute of America,
Agency Bank of America N A
Agent and AIF
PO Box 840738
Dallas, TX 75284-0738

Maxine Cole
1202 N Washington
Wellington, KS 67152

Robin W Crouse Jr.
11619 NE 146th ST
Liberty, MO 64068

Marion Wier Deford
6509 Mesa Drive
Austin, TX 78731-2703

Virginia J Delhagen
PO Box 21356
Mesa, AZ 85277-1356

Mr. Edward Dreesen Jr.
PO Box 830
Palo Cedro, CA 96073

Ingrid Dreesen Powell, TTEE
for the Betty Kyte Dreesen
Irrevocable Trust of 12-23-58
PO Box 1665
Los Altos, CA 94022

William Eaton, 87457-132
20450 N. E. 150th
Luther, OK 73054

Doris M. Griffin
1343 W. Hedding St.
San Jose, CA 95126-1615

James R. Griffin
2713 Larkspur
Antioch, CA 509

Sara S. Jones
1042 Carlisle Drive
Allen, TX 75002

Mrs. Walter Leforce
116 Main
Udall, KS 97146

James R. Leforce
225 Southeast 28th
Oklahoma City, OK 73129

Judith J Mack
32522 Crete Road
Monarch Beach, CA 92629-3619

Richard Lee Mourning
2504 Sennett
Wichita, KS 67212

Robert Alan Mourning
1508 N Stoney Point St
Wichita, KS 67212

Roger William Mourning
9429 Hardtner
Wichita, KS 67212

Ronald Eugene Mourning
711 Crestline
Wichita, KS 67212

Christopher Leslie Mourning
1621 W Shady Grove Rd
Irving, TX 75060-3771

Sidney Francis Mourning
PO Box 300882
Austin, TX 78703

Timothy Mourning
PO Box 300071
Austin, TX 78703-0002

Virginia Mourning
UnKnown

Betty Jane Pettigrew
501 Morningside Dr
Wellington, KS 67152

Cecil Bond Kyte
PO Box 30864
Santa Barbara, CA 93105

Ms Ingrid Powell
PO Box 416
Los Altos, CA 94022

Mack Purcell
UNKNOWN

Gary R. Purcell
5213 Jonathan Way -SW
Knoxville, TN 37920

Thomas G. Purcell
5516 New Hampshire Blvd
Louisville, KY 40219

Frank H Purcell Trust
PO Box 27286
Tempe, AZ 85285-7286

Helen Reed
16762 Gazeley, Apt 5127
Saugus, CA 91350

Alva P. Sanders
20450 NE 150 St
Luther, OK 73054

Dee Schooling
1417 E. Sims
Edmond, OK 73103

Ann H. Stromberg
274 San Luis Place
Claremont, CA 91711

Hazel Turner
521 S. Washington
Wichita, KS 67214

Mary C. Underwood
7006 Camino Blanco
Las Cruces, NM 88007

Donald R. Wilson
4955 County Rd 429
Van Alstyne, TX 75495

Sarah Woolum
13242 Montano Rd
Gravois Mills, MO 65037

Betty Lou Mitchell
6740 Mayview Ct
Oklahoma City, OK 73159-6527

Trust UW Francisca S
Winston C/O Meristem
Attn: L. Karls
601 Carlson PKWY Ste 800
Minnetonka, MN 55305

Welter 1981 Trust Wells Fargo
Ban NA Succ-TTEE
PO Box 5383
Denver, CO 80217

Norma C Rose
50 Royal Place Circle
Odessa, TX 79762

Gary Laird Finch Jr.
PO Box 12
Stowell, TX 77661

Eileen Heard Trustee Robert J
Heard & Eileen Heard TR
10317 Del Rey Drive
Yuma, AZ 85367

Vallory Sue Freeman
1634 Steeple Chase Place
Vista, CA 92083

Dorothy Rountree Smith
PO Box 6697
Pine Bluff, AR 71611

Connor Family LLC
PO Box 1080
Artesia, NM 88211-1080

Offsets:

COG Operating LLC
550 W. Texas
Midland, Texas 79701

Tandem Energy Corp
PO Box 1559
Midland, Texas 79702

Pioneer Natural Resources USA Inc.
PO Box 3178
Midland, Texas 79702

CBS Operating Corporation
PO Box 2236
Midland, Texas 79702

Burnett Oil Co. Inc.
801 Cherry St. Unit 9
Fort Worth, Texas 76102

Southern Bay Energy LLC
110 Cypress Station Dr. #220
Houston, Texas 77090

Southwest Royalties, Inc.
PO Box 11390
Midland, Texas 79702

Lobos Energy Partners
3817 NW Expressway Suite 950
Oklahoma City, OK 73112

ConocoPhillips Co.
PO Box 50688
Midland, Texas 79710

Anadarko Production Corp.
PO Box 2497
Midland, Texas 79702

EOG Resources, Inc.
PO Box 2267
Midland, Texas 79702

Hunt Oil Co.
PO Box 1317
Denver, CO 80201

Surface Owners:

Bureau of Land Management
620 E. Greene St.
Carlsbad, NM 88220

John. R. Gray, LLC
PO Box 1182
Artesia, NM 88211-1182



Fax: 505.983.6043

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Please pay from this Pre-Bill. Return stub with payment.	Rep ID: WG	Terms: Net 30
Description		
Classification of Ad: 450 - Legal Notice		Zone: C
Text: PO: Legal No. 21379 Case 14458- Marbob- Burch Keely Unit		

Charges from 9/23/2010 to 9/23/2010

Date	Pub	Type	Description	Price	Discount	Applied	Due
9/23/10	ADF	Ad	PO: Legal No. 21379 Legal Notice	\$75.60			\$81.03
				\$75.60			\$81.03

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Prebill Date: September 23, 2010

Ad # 31632

Account # 3041

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Affidavit of Publication

NO.

21379

STATE OF NEW MEXICO

County of Eddy:

Walter L. Green

Walter L. Green

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1 Consecutive weeks/days on the same day as follows:

First Publication September 23, 2010

Second Publication

Third Publication

Fourth Publication

Fifth Publication

Subscribed and sworn to before me this

23rd day of September 2010



OFFICIAL SEAL
Danny Scott
NOTARY PUBLIC-STATE OF NEW MEXICO

My commission expires: 3/18/2014

Danny Scott

Danny Scott

Notary Public, Eddy County, New Mexico

Copy of Publication:

LEGAL NOTICE

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION
SANTA FE, NEW MEXICO

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on October 14, 2010, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by October 4, 2010. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:

All named parties and persons
having any right, title, interest
or claim in the following cases
and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

CASE 14558:

Application of Marbob Energy Corporation for vertical expansion of the Birch Keely Unit, Eddy County, New Mexico. Applicant in the above-styled cause seeks an order amending Order No. R-7900-A to extend the vertical limits in the Birch Keely Unit to expand the Utilized Formation to 5000 feet. The Unit Area consists of lands in Sections 12, 13, 23 through 26 in Township 17 South, Range 29 East and Sections 18, 19 and 30 in Township 17 South, Range 30 East, NMPM, Eddy County, New Mexico. Said area is located approximately 2 miles west of Loco Hills, New Mexico.

Given under the Seal of the State of New Mexico Oil Conservation Division at Santa Fe, New Mexico on this 21st day September 2010.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION
Mark E. Fesmire, P.E., Director

Published in the Artesia Daily Press, Artesia, N.M., September 23, 2010. Legal No. 21379.

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Childress
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Joplin, MO 64802

SENDER: COMPLETE THIS SECTION

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- 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.

1. Article Addressed to:

Pansam Trust Raymon Newton
Childress
PO Box 66
Joplin, MO 64802

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X S.K. Tucker

☐ Agent

☐ Addressee

B. Received by (Printed Name)

S.K. TUCKER

C. Date of Delivery

9/23/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

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☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

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4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

7006 0100 0005 0626 1266

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert F. Dexter Trust UDT Date
8/27/92, Louise H. Dexter
20940 Pacific Coast Hwy
Malibu, CA 90265

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Glenn Dexter

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Glenn Dexter

C. Date of Delivery

9/27/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William D. Inglehart
701 E. Pennsylvania
Escondido, CA 92025-3004

A. Signature

W.D. Inglehart

☐ Addressee

B. Received by (Printed Name)

W.D. Inglehart

C. Date of Delivery

9/22/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1259

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Robert F. Dexter Trust UDT
8/27/92, Louise H. Dexter
20940 Pacific Coast Hwy
Malibu, CA 90265

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert F. Dexter Trust UDT Date
8/27/92, Louise H. Dexter
20940 Pacific Coast Hwy
Malibu, CA 90265

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Glenn Dexter

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Glenn Dexter

C. Date of Delivery

9/27/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label) 7006 0100 0005 0626 1266

PS Form 3811, February 2004

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102595-02-M-1540

- 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.

1. Article Addressed to:

William D. Inglehart
701 E. Pennsylvania
Escondido, CA 92025-3004

A. Signature

W.D. Inglehart

☐ Addressee

B. Received by (Printed Name)

W.D. Inglehart

C. Date of Delivery

9/22/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1259

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(Endorsement Required)

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Sharon A. Hansen

5822 Jones Ave

Westminster, CA 92683

SEP 20 2010

Postmark
Here

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Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

Donna K. Walls

616 El Cajon Blvd Ste I

PMB 253

San Diego, CA 92115

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Donna K. Walls

616 El Cajon Blvd Ste B

PMB 253

San Diego, CA 92115

2. Article Number

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent

☐ Addressee

B. Received by (Printed Name)

Derek Schmidt

C. Date of Delivery

09/22/10

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

9-23

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Beth J. Inglehart

5385 Hubbell Ct

Ventura, CA 93003

2. Article Number

(Transfer from service label)

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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

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Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

Beth J. Inglehart

5385 Hubbell Ct

Ventura, CA 93003

7006 0100 0005 0626 1228

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(Domestic Mail Only; No Insurance)

For delivery information visit our website

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Postage \$ 1.41

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Hugh Koss Burch Trust
Hugh R. Burch Rev Liv

4601 Memory Lane
Oklahoma City, OK 73112

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:
Hugh Koss Burch Trust
Hugh R. Burch Rev Living Trust

4601 Memory Lane
Oklahoma City, OK 73112

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1211

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Hugh R Burch

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Hugh R Burch

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal ServiceTM
CERTIFIED MAILTM
(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$ 1.41

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.31

Restricted Delivery Fee (Endorsement Required) 2.71

Russell Resources Ltd.
Michael Russell Lilly VP
PO Box 373
Longview, TX 75606

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:
Russell Resources Ltd.
Michael Russell Lilly VP
PO Box 373
Longview, TX 75606

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1204

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Russell Resources Ltd

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Russell Resources Ltd

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal ServiceTM
CERTIFIED MAILTM
(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$ 1.41

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Total

Sent

Street or P.O.
City,

Barbara Kruse Franke
73333 Wooded Acres
Mansfield, TX 76063

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:
Barbara Kruse Franke
73333 Wooded Acres Trail
Mansfield, TX 76063

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1198

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

A. Signature

Barbara Kruse Franke

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Barbara Kruse Franke

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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

For delivery information visit our website

OFFICIAL

Postage \$ 4.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required) 5.71

Marbob Energy Corp
 PO Box 227
 Artesia, NM 88211-0227

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

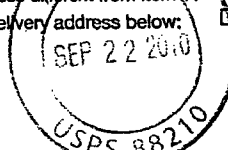
1. Article Addressed to:

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Kanda Pelier ☐ Agent ☐ Addressee

B. Received by (Printed Name) Kanda Pelier C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:



3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7006 0100 0005 0626 1181

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

For delivery information visit our website

OFFICIAL

Postage \$ 6.61
 Certified Fee 2.50
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 5.71

Jack W. McCaw
 PO Box 127
 Artesia, NM 88211-0127

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Jack W. McCaw
 PO Box 127
 Artesia, NM 88211-0127

A. Signature X Andrea Wate ☐ Agent ☐ Addressee

B. Received by (Printed Name) ANDREA WATE C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:



3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

For delivery information visit our website

OFFICIAL

Postage \$ 6.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 5.71

Leo Vernon Mock Family Trust
 Debbie Bowers &
 286 StageCoach Rd.
 Arroyo Grande, CA 94320

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Leo Vernon Mock Family Trust
 Debbie Bowers &
 286 StageCoach Rd.
 Arroyo Grande, CA 94320

COMPLETE THIS SECTION ON DELIVERY

A. Signature X DBowers ☐ Agent ☐ Addressee

B. Received by (Printed Name) DBOWERS C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7006 0100 0005 0626 1167

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$ 1.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	0.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.51

Chester J. Acree and Jean C. Acree - Trustees of the Acree Family Trust Dated 9-30-88
 2604 Via Segunda
 Palos Verdes Estates, CA 90274

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Chester J. Acree and Jean C. Acree - Trustees of the Acree Family Trust Dated 9-30-88
 2604 Via Segunda
 Palos Verdes Estates, CA 90274

2. Article Number

(Transfer from service label)

7006 0100 0005 0124 1150

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9-24-10*

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$ 1.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	0.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.51

Higgins Trust Inc.
 PO Box 6905
 Thomasville, GA 31758

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Higgins Trust Inc.
 PO Box 6905
 Thomasville, GA 31758-6905

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1443

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9/27/10*

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 1.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	0.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.51

Carol Jean Dexter Purcell
 5535 Ravia St.
 Lakewood, CA 90713

Postmark Here

Domestic Return Receipt

102595-02-M-1540

Returned

See for Instructions

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at usps.com

OFFICIAL

Postage	\$ 1.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Maryanne Kanani Lynn Blakely
1025 Bordner St.
Montpelier, OH 43543

SENDER: COM

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Maryanne Kanani Lynn Blakely
1025 Bordner St.
Montpelier, OH 43543

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>Maryanne Blakely</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
B. Received by (Printed Name) <i>Maryanne Blakely</i>	C. Date of Delivery <i>9-24-10</i>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

U.S. Postal Service™ CERTIFIED MAIL™ REC

(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at usps.com

OFFICIAL

Postage	\$ 2.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Sandra Leigh Terry
PO Box 12617
El Paso, TX 79912

SENDER: C

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandra Leigh Terry
PO Box 12617
El Paso, TX 79912

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>S.R. Talliver</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
B. Received by (Printed Name) <i>S.R. Talliver</i>	C. Date of Delivery <i>9-22-10</i>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1112

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAIL™ REC

(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at usps.com

OFFICIAL

Postage	\$ 2.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Susan Lynn Terry
7200 Montgomery NE #367
Albuquerque, NM 87109

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Susan Lynn Terry
7200 Montgomery NE #367
Albuquerque, NM 87109

A. Signature <i>S. Terry</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery <i>9/21/10</i>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1105

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

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

For delivery information visit our web

OFFICIAL

Postage \$ 1.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required) 5.71

Dolores J. Thomas
 1045 La Reina
 Lake San Marcos, CA 9

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Dolores J. Thomas
 1045 La Reina
 Lake San Marcos, CA 92078

2. Article Number

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Dolores J. Thomas ☐ Agent ☐ Addressee
 B. Received by (Printed Name) D. Thomas C. Date of Delivery 4/24/06
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 0626 1303

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

For delivery information visit our web

OFFICIAL

Postage \$ 61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required) 5.71

Margaret Louise Treat
 PO Box 20031
 Billings, MT 59104

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret Louise Treat
 PO Box 20031
 Billings, MT 59104

2. Article Number

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Margaret Louise Treat ☐ Agent ☐ Addressee
 B. Received by (Printed Name) Margaret Louise Treat C. Date of Delivery 4-24
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 0626 1310

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

For delivery information visit our web

OFFICIAL

Postage \$ 61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required) 5.71
 Total Postage & Fees \$ 5.71

Kurt A. Weber
 7631 Willis Ave
 Van Nuys, CA 91405

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Kurt A. Weber
 7631 Willis Ave
 Van Nuys, CA 91405

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Kurt A. Weber ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Kurt A. Weber C. Date of Delivery 4-23-2006
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 0626 1327

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 2.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	5.71

Postmark
Here

Virginia Weber
7631 Willis Ave
Van Nuys, CA 91405

PS Form 3800, June 2002

See Reverse for Instructions

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 1.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	5.71

William C. White
15 Desert Flower Rd
Artesia, NM 88210

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

William C. White
15 Desert Flower Rd.
Artesia, NM 88210

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- 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.

1. Article Addressed to:

EHW LLC
101 South Fourth St.
Artesia, NM 88210

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x *W.C. White* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
W.C. White C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

B. Received by (Printed Name)
Sueshelle Mathews C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 0626 1365

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

For delivery information visit our website at usps.com

OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Mary Kenney Gore
 1729 Sabatini Drive
 Henderson, NV 89052-4102

SENDER

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Kenney Gore
 1729 Sabatini Drive
 Henderson, NV 89052-4102

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Mary Gore

B. Received by (Printed Name)

Mary Gore

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐
 Date of Delivery
 2/23/04
 HENDERSON NV 89

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1365

PS Form 3811, February 2004

SENDER: CO

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Will Kathryn Kennedy Estate
 Tanya Marie Mangum - Pers Rep
 PO Box 1121
 Edgewood, NM 87015

A. Signature

Tanya Mangum

B. Received by (Printed Name)

Tanya Mangum

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐
 Date of Delivery
 2/23/04

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1372

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Jimmy R. McCutcheon
 1503 Parker Drive
 Odessa, TX 79761-1550

X

B. Received by (Printed Name)

Jimmy McCutcheon

C. Date of Delivery

9-22-10

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1389

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0626 1372

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

For delivery information visit our website at usps.com

OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Will Kathryn Kennedy
 Tanya Marie Mangum -
 PO Box 1121
 Edgewood, NM 87015

SENDER: CO

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Will Kathryn Kennedy Estate
 Tanya Marie Mangum - Pers Rep
 PO Box 1121
 Edgewood, NM 87015

A. Signature

Tanya Mangum

B. Received by (Printed Name)

Tanya Mangum

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐
 Date of Delivery
 2/23/04

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1372

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Jimmy R. McCutcheon
 1503 Parker Drive
 Odessa, TX 79761-1550

X

B. Received by (Printed Name)

Jimmy McCutcheon

C. Date of Delivery

9-22-10

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1389

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0626 1389

U.S. Postal Service™
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 (Domestic Mail Only; No Insurance Coverage)

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OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Jimmy R. McCutcheon
 1503 Parker Drive
 Odessa, TX 79761-1550

SENDER: CO

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Will Kathryn Kennedy Estate
 Tanya Marie Mangum - Pers Rep
 PO Box 1121
 Edgewood, NM 87015

A. Signature

Tanya Mangum

B. Received by (Printed Name)

Tanya Mangum

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐
 Date of Delivery
 2/23/04

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1372

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Jimmy R. McCutcheon
 1503 Parker Drive
 Odessa, TX 79761-1550

X

B. Received by (Printed Name)

Jimmy McCutcheon

C. Date of Delivery

9-22-10

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Agent ☐
 Addressee ☐

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1389

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™
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For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Lynn Barker
 10915 Huston St #11
 North Hollywood, CA

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Lynn Barker
 10915 Huston St #112
 North Hollywood, CA 91601

COMPLETE THIS SECTION ON DELIVERY

A. Signature Lynn Barker ☐ Agent ☒ Addressee

B. Received by (Printed Name) Lynn Barker C. Date of Delivery 9/23/10

D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1396

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For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Ocotillo Production LLC
 1705 W Washington Ave
 Artesia, NM 88210

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Ocotillo Production LLC
 1705 W Washington Ave
 Artesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature Randy G. Patterson ☐ Agent ☒ Addressee

B. Received by (Printed Name) Randy G. Patterson C. Date of Delivery 9-22-10

D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1402

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Total Postage & Fees \$ 5.71

Marshall & Winston Inc
 PO Box 50880
 Midland, TX 79710-0880

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Marshall & Winston Inc
 PO Box 50880
 Midland, TX 79710-0880

COMPLETE THIS SECTION ON DELIVERY

A. Signature Jason Hays ☐ Agent ☒ Addressee

B. Received by (Printed Name) Jason Hays C. Date of Delivery 9-22-10

D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1419

7006 0100 0005 0626 1426

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
For delivery information visit our website at usps.com**OFFICIAL**

Postage	\$ 1.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

 Pitch Energy Corporation
 P.O. Box 304
 Artesia, NM 88210

PS Form 3800, June 2002

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
For delivery information visit our website at usps.com**OFFICIAL**

Postage	\$ 1.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

 Costaplenty Energy Corp.
 PO Box 1182
 Artesia, NM 88211-1182

PS Form 3800, June 2002

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
For delivery information visit our website at usps.com**OFFICIAL**

Postage	\$ 1.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

 Sabine Royalty Trust Bank of
 America NA
 Escrow Agent-Sabine Royalty
 Dallas, TX 75284-0887

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

 Pitch Energy Corporation
 P.O. Box 304
 Artesia, NM 88210

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1426

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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.

1. Article Addressed to:

 Costaplenty Energy Corp.
 PO Box 1182
 Artesia, NM 88211-1182

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1433

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

 Sabine Royalty Trust Bank of
 America NA
 Escrow Agent-Sabine Royalty Tr.
 Dallas, TX 75284-0887

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1440

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kanda Robison*☐ Agent☐ Addressee

B. Received by (Printed Name)

Kanda Robison

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

B. Received by (Printed Name)

Kanda Robison

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *ORIS*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 0626 1464

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our web site

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Hugh Burch
 3315 NW 63rd
 Oklahoma City, OK

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Hugh Burch
 3315 NW 63rd
 Oklahoma City, OK 73116

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9.23

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

7006 0100 0005 0626 1464

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Trust UW Francisca S Winston
 c/o Meristem
 Attn: L. Karls
 601 Carlson PKWY
 Minnetonka, NM 55305

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Trust UW Francisca S Winston
 c/o Meristem
 Attn: L. Karls
 601 Carlson PKWY Ste 800
 Minnetonka, NM 55305

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1464

U.S. Postal Service™
CERTIFIED MAIL™
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For delivery information visit our web site

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

CQWE LLC Bob Acree
 PO Box 241826
 Anchorage, AK 99524

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

CQWE LLC Bob Acree Manager
 PO Box 241826
 Anchorage, AK 99524

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1471

U.S. Postal Service™
CERTIFIED MAIL™ R
(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Downer Family Trust
Selma Downer-TTEE
21948 Marjoram Ct
Santa Clarita, CA 91350

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Downer Family Trust
Selma Downer-TTEE
21948 Marjoram Ct
Santa Clarita, CA 91350

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Cary Severn* ☒ Agent ☒ Addressee

B. Received by (Printed Name)

CARY SEVERN

C. Date of Delivery

9/23/10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1488

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ R
(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$5.71

Long Minerals Trust U/T/A
4189 Bellaire Blvd Ste 202
Houston, TX 77025-1045

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Long Minerals Trust U/T/A 6/4/08
4189 Bellaire Blvd Ste 202
Houston, TX 77025-1045

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *T. Helling* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

U.S. Postal Service™
CERTIFIED MAIL™ R
(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 7

Total Postage & Fees \$5.71

Donna Finch Adams
PO Box 1025
Dennison, TX 75021

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Donna Finch Adams
PO Box 1025
Dennison, TX 75021

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Donna Finch Adams* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

DONNA FINCH ADAMS

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1501

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance)

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

To Gary Laird Finch Jr.
PO Box 12
Stowell, TX 77661

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Gary Laird Finch Jr.
PO Box 12
Stowell, TX 77661

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2133

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance)

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OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Juliette Rathbone Finch Family
Trust Johnny Walker Finch Tr
PO Box 2395
Kerrville, TX 78029-2395

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Juliette Rathbone Finch Family
Trust Johnny Walker Finch Trustee
PO Box 2395
Kerrville, TX 78029-2395

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Dexter Family Trust DTD
3/31/2009 Robert & Hadiya
Dexter Trustees
9262 Irongate Lane
San Diego, CA 92126

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1532

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Myrona Finch

☒ Agent

☐ Addressee

B. Received by (Printed Name)

Myrona Finch

C. Date of Delivery

9-23-10

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

A. Signature

x Johnny Finch

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Johnny Finch

C. Date of Delivery

9-22-10

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

SEP 22 2010

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

A. Signature

x Hadiya Dexter

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Hadiya Dexter

C. Date of Delivery

9-23-10

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

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For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

Minerals Management Service
PO Box 5810 TA
Denver, CO 80217-5810

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Minerals Management Service
PO Box 5810 TA
Denver, CO 80217-5810

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Beau C. Conkel		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) Beau C. Conkel		C. Date of Delivery 9-22-16
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

Selma E Andrews Trust
Peggy Barrett
Bank of America NA TTEE
PO Box 840738
Dallas, TX 75284-0738

2. Article Number

7006 0100 0005 0626 1549

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Selma E Andrews Trust F/B/O
Peggy Barrett
Bank of America NA TTEE
PO Box 840738
Dallas, TX 75284-0738

COMPLETE THIS SECTION ON DELIVERY

A. Signature X [Signature]		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) [Signature]		C. Date of Delivery SEP 23 2016
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

Selma E Andrews Perpetual
Charitable Trust
Bank of America NA TTEE
PO Box 840738
Dallas, TX 75284-0738

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1556

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- 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.

1. Article Addressed to:

Selma E Andrews Perpetual
Charitable Trust
Bank of America NA TTEE
PO Box 840738
Dallas, TX 75284-0738

B. Received by (Printed Name) [Signature]	C. Date of Delivery SEP 23 2016
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1563

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PS Form 3800, June 2002

U.S. Postal Service™

CERTIFIED MAIL™

(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.71

D V LoFlin Jr.
PO Box 4987
Monroe, LA 71211

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

D V LoFlin Jr.
PO Box 4987
Monroe, LA 71211

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☐ AddresseeB. Received by (Printed Name) *D V LOFLIN JR* C. Date of Delivery *SEP 23 2010*D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1570

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™

(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$.41

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.51

John Neal Lofline
162 Cottonwood
Uvalde, TX 78801

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

John Neal Lofline
162 Cottonwood
Uvalde, TX 78801

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☐ AddresseeB. Received by (Printed Name) *John Neal Lofline* C. Date of Delivery *9-22-10*D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1587

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™

(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.71

James Rankin
230 Taglewood LN
Levelland, TX 79336-6

- 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.

1. Article Addressed to:

James Rankin
230 Taglewood LN
Levelland, TX 79336-6612

B. Received by (Printed Name) C. Date of Delivery

JAMES S. RANKIN *[Signature]* ☐ Yes ☐ NoD. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1594

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance)

For delivery information visit our website

OFFICIAL

Postage \$ 0.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Mary K Rankin Elliott
104 Wood circle
Levelland, TX 79336

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary K Rankin Elliott
104 Wood circle
Levelland, TX 79336

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X David D Elliott

B. Received by (Printed Name) DAVID ELLIOTT C. Date of Delivery 9-22-10

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3800, June 2002

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

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For delivery information visit our website

OFFICIAL

Postage \$ 0.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Robert R Purcell Family
Darby C Ritter Trustee
2012 East 26th Street
Lawrence, KS 66046

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1655

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert R Purcell Family Trust
Darby C Ritter Trustee
2012 East 26th Street
Lawrence, KS 66046

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X Mary Purcell

B. Received by (Printed Name) MARY PURCELL C. Date of Delivery 10-15-10

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1662

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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For delivery information visit our website

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Postage \$ 0.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 2.71

Rosemary Leforce
715 Spring Lane
Bristow, OK 74010

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosemary Leforce
715 Spring Lane
Bristow, OK 74010

A. Signature ☒ Agent ☐ Addressee
X Rosemary Leforce

B. Received by (Printed Name) Rosemary Leforce C. Date of Delivery 9/22/10

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1679

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

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OFFICIAL USE

Postage \$

1.61

Certified Fee

2.80

Return Receipt Fee
(Endorsement Required)

2.30

Restricted Delivery Fee
(Endorsement Required)

5.71

Frank W Addis
97304 E Alhambra Rd
Kennewick, WA 99337-8800

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Frank W Addis
97304 E Alhambra Rd
Kennewick, WA 99337-8800

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1686

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Connie Alexander
8716 Warner Rd
Kernersville, NC 27284

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1693

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™

(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

1.61

Certified Fee

2.80

Return Receipt Fee
(Endorsement Required)

2.30

Restricted Delivery Fee
(Endorsement Required)

5.71

Roy C Andrews
C/O J P Andrews
3113 79th St.
Lubbock, TX 79423-1823

Postmark
Here

Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Judy Addis

☐ Agent

☐ Addressee

B. Received by (Printed Name)

JUDY ADDIS

C. Date of Delivery

9/23/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Connie Alexander

☒ Agent

☐ Addressee

B. Received by (Printed Name)

CONNIE ALEXANDER

C. Date of Delivery

9/23/10

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Returned

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

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For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Peggy Fallon Ashenbrenner
401 E 8th St Ste 214-348
Souix Falls, SD 57103

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Peggy Fallon Ashenbrenner
401 E 8th St Ste 214-348
Souix Falls, SD 57103

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>Christina Zrelack</i>	<input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
B. Received by (Printed Name) Christina Zrelack	C. Date of Delivery 9/22/11
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Betty Jean Banks
8688 East Easter Place
Centennial, CO 80112-18

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Betty Jean Banks
8688 East Easter Place
Centennial, CO 80112-1856

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>B. Banks</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) B. Banks	C. Date of Delivery
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes	

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1723

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Braille Institute of America
Agency Bank of America
Agent and AIF
PO Box 840738
Dallas, TX 75284-0738

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Braille Institute of America,
Agency Bank of America N A
Agent and AIF
PO Box 840738
Dallas, TX 75284-0738

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>MS</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery SEP 23 2010
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes	

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 1730

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our web

OFFICIAL

Postage \$ 1.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 2.30
Total Postage & Fees \$ 8.01

Maxine Cole
1202 N Washington
Wellington, KS 6715

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Maxine Cole
1202 N Washington
Wellington, KS 67152

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) Jane Cole C. Date of Delivery 9/23/10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1747

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™
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For delivery information visit our web

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Postage \$ 1.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 2.30
Total Postage & Fees \$ 8.01

Robin W Crouse Jr.
11619 NE 146th ST
Liberty, MO 64068

- 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.

1. Article Addressed to:

Robin W Crouse Jr.
11619 NE 146th ST
Liberty, MO 64068

B. Received by (Printed Name) Shelly Crouse C. Date of Delivery 9-22-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1754

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™
CERTIFIED MAIL™**

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our web

OFFICIAL

Postage \$ 1.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 2.30
Total Postage & Fees \$ 8.01

To
Sen
6509 Mesa Drive
Austin, TX 78731

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Marion Wier Deford
6509 Mesa Drive
Austin, TX 78731-2703

A. Signature X Marion Deford ☐ Agent ☒ Addressee

B. Received by (Printed Name) MARION DEFORD C. Date of Delivery SEP 23 2010

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1761

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PS Form 3800, June 2002

U.S. Postal ServiceTM
CERTIFIED MAILTM
(Domestic Mail Only; No Insurance)

For delivery information visit our web site

OFFICIAL

Postage \$ 1.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.35

Restricted Delivery Fee (Endorsement Required)

Virginia J Delhagen
PO Box 21356
Mesa, AZ 85277-13

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Virginia J Delhagen
PO Box 21356
Mesa, AZ 85277-1356

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

☐ Agent
☐ Addressee

B. Received by (Printed Name)

V. DELHAGEN

C. Date of Delivery

9-24-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1778

U.S. Postal ServiceTM
CERTIFIED MAILTM
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For delivery information visit our web site

OFFICIAL

Postage \$ 1.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.35

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.71

Mr. Edward Dreesen
PO Box 830
Palo Cedro, CA 96073

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Edward Dreesen Jr.
PO Box 830
Palo Cedro, CA 96073

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

☐ Agent
☐ Addressee

B. Received by (Printed Name)

ED DRESSEN

C. Date of Delivery

9-27-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal ServiceTM
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OFFICIAL

Postage \$ 1.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.35

Restricted Delivery Fee (Endorsement Required)

Ingrid Dreesen Po
for the Betty Kyte Dreesen
Irrevocable Trust
PO Box 1665
Los Altos, CA 94022

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Ingrid Dreesen Powell, TTEE
for the Betty Kyte Dreesen
Irrevocable Trust of 12-23-58
PO Box 1665
Los Altos, CA 94022

A. Signature

X [Signature]

☐ Agent
☐ Addressee

B. Received by (Printed Name)

INGRID POWELL

C. Date of Delivery

9-27-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1792

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

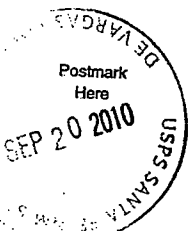
7006 0100 0005 0626 1808

U.S. Postal Service™
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Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71



William Eaton, 87457-132
20450 N. E. 150th
Luther, OK 73054

See Reverse for Instructions

Returned

7006 0100 0005 0626 1815

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71



Doris M. Griffin
1343 W. Hedding St.
San Jose, CA 95126-1615

PS Form 3800, June 2002

See Reverse for Instructions

Returned

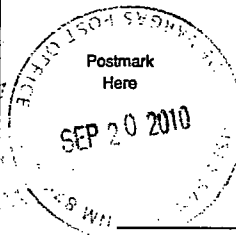
7006 0100 0005 0626 1822

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71



James R. Griffin
2713 Larkspur
Antioch, CA 509

PS Form 3800, June 2002

for Instructions

Returned

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For delivery information visit our website

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Postage \$ 1.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)

Sara S. Jones
 1042 Carlisle Drive
 Allen, TX 75002

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Sara S. Jones
 042 Carlisle Drive
 Allen, TX 75002

COMPLETE THIS SECTION ON DELIVERY

A. Signature Sara S. Jones ☐ Agent ☐ Addressee
 B. Received by (Printed Name) Sara S. Jones C. Date of Delivery 9-25
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7006 0100 0005 0626 1853

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For delivery information visit our website

OFFICIAL

Postage \$ 1.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)

Mrs. Walter Leforce
 116 Main
 Udall, KS 97146

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Mrs. Walter Leforce
 116 Main
 Udall, KS 97146

COMPLETE THIS SECTION ON DELIVERY

A. Signature Walter Leforce ☐ Agent ☐ Addressee
 B. Received by (Printed Name) Walter Leforce C. Date of Delivery 9-22-10
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

James R. Leforce
 225 Southeast 28th
 Oklahoma City, OK 73129

COMPLETE THIS SECTION ON DELIVERY

A. Signature James R. Leforce ☐ Agent ☐ Addressee
 B. Received by (Printed Name) James R. Leforce C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7006 0100 0005 0626 1853

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1541

PS Form 3800, June 2002

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Postage \$ 1.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)

Tot Judith J Mack
32522 Crete Road
Monarch Beach, CA 92629-3619

Street or P.O. City

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Judith J Mack
32522 Crete Road
Monarch Beach, CA 92629-3619

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Judith J Mack ☐ Agent ☒ Addressee
B. Received by (Printed Name) Judith J Mack C. Date of Delivery 9-24-10
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Lee Mourning
2504 Sennett
Wichita, KS 67211

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Richard Mourning ☐ Agent ☒ Addressee
B. Received by (Printed Name) RICHARD MOURNING C. Date of Delivery 9-24-10
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1877

PS Form 3811, February 2004

102595-02-M-1540

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Postage \$ 1.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)

Richard Lee Mourning
2504 Sennett
Wichita, KS 67212

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert Alan Mourning
1508 N Stoney Point St
Wichita, KS 67212

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Robert Mourning ☐ Agent ☒ Addressee
B. Received by (Printed Name) ROBERT MOURNING C. Date of Delivery 09/22/10
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1884

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

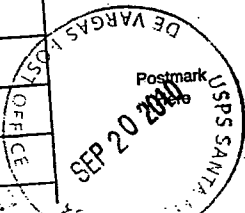
PS Form 3800, June 2002

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OFFICIAL USE

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 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)



Roger William Mourning
 9429 Hardtner
 Wichita, KS 67212

Returned

PS Form 3800, June 2002

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Postage \$.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)

Ronald Eugene Mourning
 711 Crestline
 Wichita, KS 67212

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Ronald Eugene Mourning
 711 Crestline
 Wichita, KS 67212

2. Article Number
 (Transfer from service label)

7006 0100 0005 0626 1914

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *X Ronald E Mourning* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *RONALD MOURNING* C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
- ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3800, June 2002

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Postage \$.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)

Postmark
 Here

To: Christopher Leslie Mourning
 Sent 1621 W Shady Grove Rd
 Irving, TX 75060-3771
 Street or P.O. Box
 City, State, ZIP+4

Returned

PS Form 3800, June 2002

See Reverse for Instructions

7006 0100 0005 0626 1952

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 For delivery information visit our website at www.usps.com
OFFICIAL USE

Postage	\$.61	Postmark Here
Certified Fee	2.80	
Return Receipt Fee (Endorsement Required)	2.30	
Restricted Delivery Fee (Endorsement Required)		

Sidney Francis Mourning
 PO Box 300882
 Austin, TX 78703

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 0626 1952

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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 For delivery information visit our website at www.usps.com
OFFICIAL USE

Postage	\$.61	Postmark Here
Certified Fee	2.80	
Return Receipt Fee (Endorsement Required)	2.30	
Restricted Delivery Fee (Endorsement Required)		

Timothy Mourning
 PO Box 300071
 Austin, TX 78703-0002

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 0626 1952

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Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

Betty Jane Pettigrew
 501 Morningside Dr
 Wellington, KS 67152

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Betty Jane Pettigrew
 501 Morningside Dr
 Wellington, KS 67152

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
James J. McDonald

B. Received by (Printed Name) C. Date of Delivery
Jani's J. McDonald 9-23-10

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 0626 1952

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

To: Cecil Bond Kyte
PO Box 30864
Santa Barbara, CA

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Cecil Bond Kyte
PO Box 30864
Santa Barbara, CA 93105

2. Article Number

7006 0100 0005 0626 1976

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Ms Ingrid Powell
PO Box 416
Los Altos, CA 94022

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms Ingrid Powell
PO Box 416
Los Altos, CA 94022

2. Article Number

7006 0100 0005 0626 1976

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Gary R. Purcell
5213 Jonathan Way -
Knoxville, TN 37920

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Gary R. Purcell
5213 Jonathan Way -SW
Knoxville, TN 37920

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 1983

A. Signature

X

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3800, June 2002

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

Postmark
Here

Thomas G. Purcell
 5516 New Hampshire Blvd
 Louisville, KY 40219

Returned

PS Form 3800, June 2002

See Reverse for Instructions

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

For delivery information visit our website at www.usps.com

OFFICIAL

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

SENDER: COMPLETE

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Frank H Purcell Trust
 PO Box 27286
 Tempe, AZ 85285-7286

A. Signature <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery SEP 20 2010
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	
<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article Number
 (Transfer from service label)

7006 0100 0005 0626 2003

PS Form 3811, February 2004

Domestic Return Receipt

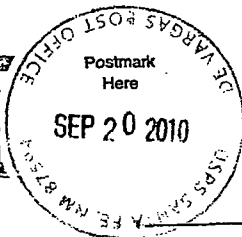
102595-02-M-1540

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 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	



Helen Reed
 16762 Gazeley, Apt 5127
 Saugus, CA 91350

Returned

PS Form 3800, June 2002

See Reverse for Instructions

7006 0100 0005 0626 2027

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

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OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Postmark Here
SEP 20 2010

Alva P. Sanders
 20450 NE 150 St
 Luther, OK 73054

See for Instructions

Returned

7006 0100 0005 0626 2034

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Postmark Here
SEP 20 2010

Dee Schooling
 1417 E. Sims
 Edmond, OK 73103

Returned

7006 0100 0005 0626 2041

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Sent To
 Street or PO
 City, State
 Ann H. Stromberg
 274 San Luis Place
 Claremont, CA 91711

PS Fo

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Ann H. Stromberg
 274 San Luis Place
 Claremont, CA 91711

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

R. Voliti

C. Date of Delivery

9-22-02

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes
☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 0626 2041

S Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage \$.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)
Total \$ 5.71

Postmark
Here

Returned

Sent by Hazel Turner
Street or PO 521 S. Washington
City, State, ZIP+4® Wichita, KS 67214

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OFFICIAL USE

Postage \$.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.71

Mary C. Underwood
7006 Camino Blanco
Las Cruces, NM 88007

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary C. Underwood
7006 Camino Blanco
Las Cruces, NM 88007

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Mary Underwood* ☐ Agent ☒ Addressee
- B. Received by (Printed Name)
- C. Date of Delivery *9/24/10* ☐ Yes ☒ No
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 2065

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Postage \$.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.71

Donald R. Wilson
4955 County Rd 429
Van Alstyne, TX 75

- SENDER: COMPLETE THIS SECTION**
- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Donald R. Wilson
4955 County Rd 429
Van Alstyne, TX 75495

- A. Signature *Donald R. Wilson* ☐ Agent ☒ Addressee
- B. Received by (Printed Name) *Donald R. Wilson*
- C. Date of Delivery *9/24/10* ☐ Yes ☒ No
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 2072

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

7006 0100 0005 5000 9290 0626 2096

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Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total	5.71

Postmark
Here

Sarah Woolum
13242 Montano Rd
Gravois Mills, MO 65037

Returned

7006 0100 0005 5000 9290 0626 2096

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage	\$.41
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total	5.51

Postmark
Here

Betty Lou Mitchell
6740 Mayview Ct
Oklahoma City, OK 73159-6527

Returned

7006 0100 0005 5000 9290 0626 2102

U.S. Postal Service™
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OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total	5.71

Postmark
Here

Trust UW Francisca S
Winston C/O Meristem
Attn: L. Karls
601 Carlson PKWY Ste 800

Returned

7006 0100 0005 0626 2126

U.S. Postal Service™
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Postage \$.60
Certified Fee 2.8
Return Receipt Fee (Endorsement Required) 2.2
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.6
Welter 1981 Trust Wells Fargo
Ban NA Succ-TTEE
PO Box 5383
Denver, CO 80217

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:
Welter 1981 Trust Wells Fargo
Ban NA Succ-TTEE
PO Box 5383
Denver, CO 80217
2. Article Number

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Matthew Hadeau* ☐ Agent ☐ Addressee
B. Received by (Printed Name) *Matthew Hadeau* C. Date of Delivery *9-23-10*
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 0626 2126

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Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Norma C Rose
50 Royal Place Circle
Odessa, TX 79762

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:
Norma C Rose
50 Royal Place Circle
Odessa, TX 79762
2. Article Number
(Transfer from service label) 7006 0100 0005 0626 2126

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Norma C Rose* ☐ Agent ☐ Addressee
B. Received by (Printed Name) *Norma C Rose* C. Date of Delivery *9-23-10*
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3800, June 2002

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0626 1518

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Postage \$
Certified Fee 2
Return Receipt Fee (Endorsement Required) 2
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4
Gary Laird Finch Jr.
PO Box 12
Stowell, TX 77661

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:
Gary Laird Finch Jr.
PO Box 12
Stowell, TX 77661
2. Article Number
(Transfer from service label) 7006 0100 0005 0626 1518

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Myrna Finch* ☐ Agent ☐ Addressee
B. Received by (Printed Name) *Myrna Finch* C. Date of Delivery *9-23-10*
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Postage \$ 1.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 5.71

Eileen Heard Trustee R
 Heard & Eileen Heard
 10317 Del Rey Drive
 Yuma, AZ 85367

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Eileen Heard Trustee Robert J
 Heard & Eileen Heard TR
 10317 Del Rey Drive
 Yuma, AZ 85367

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Eileen Heard

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Eileen Heard

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

7006 0100 0005 0626 2140

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Postage \$ 1.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 5.71

Total Postage & Fees \$ 11.22

Vallory Sue Freeman
 1634 Steeple Chase
 Vista, CA 92083

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Vallory Sue Freeman
 1634 Steeple Chase Place
 Vista, CA 92083

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Vicki

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery
 09-22-10

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2157

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Postage \$ 1.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required) 5.71

Total

Dorothy Rountree
 PO Box 6697
 Pine Bluff, AR 71611

SENDER: CC

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Dorothy Rountree Smith
 PO Box 6697
 Pine Bluff, AR 71611

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Dorothy Rountree Smith

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2164

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SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage \$.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 5.71

Connor Family LLC
PO Box 1080
Artesia, NM 88211-1

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Connor Family LLC
PO Box 1080
Artesia, NM 88211-1080

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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2. Article Number
(Transfer from service label) 7006 0100 0005 0626 2171

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Postage \$.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 5.71

COG Operating LLC
550 W. Texas
Midland, Texas 79

- 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.

1. Article Addressed to:

COG Operating LLC
550 W. Texas
Midland, Texas 79701

B. Received by (Printed Name)

[Signature]

☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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OFFICIAL USE

Postage \$.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 5.71

Tandem Energy Corp
PO Box 1559
Midland, Texas 79702

2. Article Number
(Transfer from service label) 7006 0100 0005 0626 2188

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Postmark
Here

Instructions

Returned

7006 0100 0005 0626 2202

U.S. Postal Service™

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(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at usps.com

OFFICIAL

Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.71

Pioneer Natural Resources Inc.
PO Box 3178
Midland, Texas 79702

City

PS Form

SENDER:

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Pioneer Natural Resources USA Inc.
PO Box 3178
Midland, Texas 79702

A. Signature

X *[Signature]*
☒ Agent
☒ Addressee

B. Received by (Printed Name)

John Lopez Jr.

C. Date of Delivery

9-23-10

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

CBS Operating Corporation
PO Box 2236
Midland, Texas 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *PA Redman*
☒ Agent
☐ Addressee

B. Received by (Printed Name)

PA Redman

C. Date of Delivery

9-23-10

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2218

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Burnett Oil Co. Inc.
801 Cherry St. Unit 9
Fort Worth, Texas 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. Berger*
☒ Agent
☐ Addressee

B. Received by (Printed Name)

M. Berger

C. Date of Delivery

9/22

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2225

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0626 2218

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

CBS Operating Corporation
PO Box 2236
Midland, Texas 79702

City

PS Form

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

CBS Operating Corporation
PO Box 2236
Midland, Texas 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *PA Redman*
☒ Agent
☐ Addressee

B. Received by (Printed Name)

PA Redman

C. Date of Delivery

9-23-10

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2218

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Burnett Oil Co. Inc.
801 Cherry St. Unit 9
Fort Worth, Texas 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. Berger*
☒ Agent
☐ Addressee

B. Received by (Printed Name)

M. Berger

C. Date of Delivery

9/22

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2225

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

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(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at usps.com

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Postage \$.61

Certified Fee 2.80

Return Receipt Fee (Endorsement Required) 2.30

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.71

Burnett Oil Co. Inc.
801 Cherry St. Unit 9
Fort Worth, Texas 76102

City

PS Form

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

For delivery information visit our website at www.usps.com

OFFICIAL

Postage \$ 4.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.71

Sent
Southern Bay Energy LLC
110 Cypress Station Dr.
Houston, Texas 77090

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Southern Bay Energy LLC
110 Cypress Station Dr. #220
Houston, Texas 77090

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2232

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature] ☐ Agent
☐ Addressee

B. Received by (Printed Name)

[Signature] C. Date of Delivery 9-22-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 4.61
Certified Fee 2.80
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.71

Sent
Southwest Royalties, Inc.
PO Box 11390
Midland, Texas 79702

Postmark
Here

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Lobos Energy Partners
3817 NW Expressway Suite 950
Oklahoma City, OK 73112

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2256

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature] ☐ Agent
☐ Addressee

B. Received by (Printed Name)

[Signature] C. Date of Delivery 9/22/10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 0626 2270

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OFFICIAL USE

Postage	\$ 1.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

ConocoPhillips Co.
PO Box 50688
Midland, Texas 79710

Article Addressed to:

ConocoPhillips Co.
PO Box ~~50688~~ 51810
Midland, Texas 79710

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2270

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M

COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *AWORADE*

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9-28-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

Box 51810

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 0626 2287

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Postage	\$ 1.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Anadarko Production Corp.
PO Box 2497
Midland, Texas 79702

Postmark
Here

SEP 20 2010

Instructions

Returned

7006 0100 0005 0626 2287

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OFFICIAL USE

Postage	\$ 1.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

EOG Resources, Inc.
PO Box 2267
Midland, Texas 79702

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

EOG Resources, Inc.
PO Box 2267
Midland, Texas 79702

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 2287

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *B-Bell*

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9/23/10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	

Postmark
Here

SEP 10 2010

Total Postage
Sent To
Hunt Oil Co.
PO Box 1317
Denver, CO 80201

PS Form 3800, June 2002 See Reverse for Instructions

Returned

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OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

Bureau of Land Management
620 E. Greene St.
Carlsbad, NM 88220

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Bureau of Land Management
620 E. Greene St.
Carlsbad, NM 88220

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 0597

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9/22*

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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OFFICIAL USE

Postage	\$.61
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.71

John. R. Gray, LLC
PO Box 1182
Artesia, NM 88211

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

John. R. Gray, LLC
PO Box 1182
Artesia, NM 88211-1182

2. Article Number

(Transfer from service label)

7006 0100 0005 0626 0580

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Kanda Robin ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Kanda Robin* C. Date of Delivery *SEP 22 2010*

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SEP 22 2010
USPS 88210

102595-02-M-1540

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OFFICIAL

Postage \$ 1.61
 Certified Fee 2.80
 Return Receipt Fee (Endorsement Required) 2.50
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 5.71

Raye Miller
 2308 sierra Vista Rd
 Artesia, NM 88210

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Raye Miller
 2308 sierra Vista Rd
 Artesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) MARY K. MILLER C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 0626 1297

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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 (Domestic Mail Only; No Insurance)

For delivery information visit our website at usps.com

OFFICIAL

Postage \$ 1.61
 Certified Fee 2.30
 Return Receipt Fee (Endorsement Required) 2.30
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 5.71

Raye Miller & Dastarac
 2308 Sierra Vista Rd
 Artesia, NM 88210

SENDER: COMPLETE THIS SECTION

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Raye Miller & Dastarac Inc.
 2308 Sierra Vista Rd
 Artesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) MARY K. MILLER C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 0626 1273

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540