SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Sigurture Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delive Attach this card to the back of the mailpiece, ackbury 14-05 or on the front if space permits. D. Is delivery address different from item 1? Ó Yes over-Piding (Royalty Royalty Enterns/ Dunens/ 1. Article Addressed to: If YES, enter delivery address below: ABC Del - bas hoperties 3208 boyd Midland, 2X 79705 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8778 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-08 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signatur Complete items 1, 2, and 3. Also complete ernice Udame Addresse Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Date of Deliver Received by (Printed Name Attach this card to the back of the mailpiece, 22 or on the front if space permits. I Ye D. Is delivery address different from item 1? 1. Article Addressed to: E NO If YES, enter delivery address below: Mary Gernice adams 9743 bon Flower Lane Owings Mills; Mrd 2117 3. Service Type Certified Mail Express Mail Registered - Return Receipt for Merchandis C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) C Yes 2 Article Number 7002 2410 0001 0133 8785 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-08 SIMIAS. COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete hanthe Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. ceived by C. Date of Delive Attach this card to the back of the mailpiece, 317 Danenot or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: , paviel - Rebecca albanese 2301 Whitcomb Place Jalls Church, VA 22046 Service Type З. Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8792 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-08

COMPLETE THIS SECTION ON DELIVERY **SENDER:** COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Na) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YES, enter delivery address below: E-No Resources Company 6901 East Walsh Place Denver, CO 80224 3. Service Certified Mail DB press Mail Return Receipt for Merchandis C Registered 🗖 C.Ø.D. Insured Mail 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8808 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-08 horttony COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** Complete items 1, 2, and 3. Also complete A. Signature C Agent item 4 if Restricted Delivery is desired. X Print your name and address on the reverse Addresse so that we can return the card to you. В. ceived by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 7-18-03 Amak or on the front if space permits. D. Is delivery address different from item 1? 🛛 Yes 1. Article Addressed to: If YES, enter delivery address below: CHN0 ane amato 37290 Stanton Point Road Ingeliele, JR 60041 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 8815 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-08 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature 2 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. B. (Printed N Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different address different 1 1. Article Addressed to: A.G. andrikopouloc Res. Inc. P.O. Box 788 Chezenne, WG 82003 If YES, enter delivery addre s below: 8289 З. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 8761 (Transfer from service label) 102595-02-M-08

PS Form 3811, August 2001

Domestic Return Receipt

SIENDER 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. Printed Name Øate of Delive Attach this card to the back of the mailpiece, 7-28 ~ or on the front if space permits. 🛛 Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: 1 No hay Judy andrikopoulas f.O. Box 350 Daniel, WY 83115-0350 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0134 0375 (Transfer from service label) Receipt 102595-02-M-10 boodtone COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION. A. Complete items 1, 2, and 3. Also complete C Agent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse so that we can return the card to you. Date 21 Peliver B. Received by (Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: apache Corporation P.D. Dox 840133 Dollas, 2X 75284-0133 Servjøe Type 3. Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 8839 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 board tonis COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent 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. different fra m item 1 1. Article Addressed to: 2 No If YES, enter delivery address below: R. Jucker attebery 4.0. Bax 2351 bartleville, OK 74005 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 7002 2410 0001 0133 8846 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

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COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Α. Signatu Complete items 1, 2, and 3. Also complete D Agent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name C., Date of Deliver 4 2003 Attach this card to the back of the mailpiece, or on the front if space permits. 🗆 Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: 2 No Selco Development Corp c/o. Enron Olel + Ses Co. P.O. Box 840321 3. Service Type Certified Mail Express Mail Dallas, 2X 75284-0321 Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 🗆 Yes 2. Article Number 7002 2410 0001 0133 8860 (Transfer from service label, PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Х Address Print your name and address on the reverse so that we can return the card to you. e of Delive Attach this card to the back of the mailpiece, or on the front if space permits. □ Yes 1. Article Addressed to: 1 No martha Nobles Black yo welle Jaugo atta: OGAM administration 3. Service Type P.O. Bay 5383 Certified Mail Express Mail Return Receipt for Merchandis Registered Dewer, CO 80270 C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 8884 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-1 hoodting SENDER. COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. C Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 14.0 or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: D No If YES, enter delivery address below: marthan Black Januly Inot alo Welke Farge Bank atta: Oil + Sur Trust Dept. 40 NE Roog 410, Suite 300 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis San antonio, 2× 79216 Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 8877 (Transfer from service label) PS Form 3811, August 2001. Domestic Return Receipt 102595-02-M-10

SENDER: COMPLETE T COMPLETE THIS SECTION ON DELIVERY **ECTION** A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. □ Agent Х Print your name and address on the reverse □ Addresseso that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YES, enter delivery address below: 🗆 No alexander S. Bowers Estate Rebert M. Musselman, Equator P.O. Dox 254 harlottesville, VA 22902 3. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 8891 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-103 bosetting COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signati Agent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse so that we can return the card to you. C. Date of Deliver B. Rec (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different free 1. Article Addressed to: 1 No If YES, enter delivery address below: america hoduction Co P.O. Box 3092 Flouston, 2×77253 3. Service Type Certified Mail Express Mail C Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0351 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 hoo true SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to If YES, enter delivery address below: E No V.M. Breece 23430 Catta ator 3. Service Type Certified Mail Express Mail C Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8907 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signator Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse so that we can return the card to you. Receiv d by (Printed Name) C. Date of Delive Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: 12 No Laura R. Schaller Grenna A'LEK NC P.D. Box 1333 ഹറ് Bries Creek, MC 27506 Service Type Certified Mail D'Express Mail Registered Return Receipt for Merchandis Insured MailpS C.O.D. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8914 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. В. Date of Deliver Attach this card to the back of the mailpiece, 23-0 or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: 2 No Wanda Surness 75535 Fern Hill Road Rainier, OR 97048 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8921 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boort SENDER: COMPLETE THIS SECTION **COMPLETE THIS SECTION ON DELIVERY** Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: 1 No Lewis Q. Campbell 1974 J P.O. Box 51508 albuqueque, MM 87181-1508 З. Service Certif Register eipt for Merchandis Insured Mail 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 8938 (Transfer from service label) 102595-02-M-10

PS Form 3811, August 2001

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent х Print your name and address on the reverse C Addresse so that we can return the card to you. Pr**i**nted Name C. Date of Deliver Attach this card to the back of the mailpiece, 7-14-03 or on the front if space permits. 171-□ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: J2 No b.K. + D.L. Carpenter 2935 Nob Hell Drive Casper. WZ 82601 3. Service Type Certified Mail Express Mail E Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 8945 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Sooctunies COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signature A. Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse C Addresse so that we can return the card to you. C. Date of Deliver rinted Nam Attach this card to the back of the mailpiece, $o/\omega < l$ 7-11-0: or on the front if space permits. Dr. Is delivery address different from item 1? □ Yes 1. Article Addressed to: 1 No -If YES, enter delivery address below: attileen Colwell 2254 Shawree South bast brand Rapids, MJ 49506 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis C Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 8952 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 - Joan Hat States houtin SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. C Agent Print your name and address on the reverse Addresse so that we can return the card to you. C. Date of Deliver Printed Name Attach this card to the back of the mailpiece, 14 or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: D No If YES, enter delivery address below: ometria lel + San Inc. 210 West leth St. Suite 1001 Fort Worth, 2X 76102 3. Service Type Certified Mail Express Mail C Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 8969 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete C Agent item 4 if Restricted Delivery is desired. Х otte Print your name and address on the reverse Addresse so that we can return the card to you. В. Received by (Printed Na Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address différent from item 1. Article Addressed to: ,₽No If YES, enter delivery address below: Jane 7. Cotter 6625 Barber Place, NE albuquerque, MM 87109 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8976 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 bood times COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. В. C. Date of Deliver (Printed Name) Attach this card to the back of the mailpiece, DOKKUSCU or on the front if space permits. D. Is delivery address different from item 1? 1 Yes 1. Article Addressed to: 2 No If YES, enter delivery address below: Cromer Dil 410 17th Street, Suite 340 Denver. CO 30202 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 8983 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Scotting COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, Sleson Floh er or on the front if space permits. D. Is delivery address differen 🗆 Yeş from item 1? 1. Article Addressed to: If YES, ep **⊿**No Cuesta Roduction Compan P.O. box 451 albuquergue, NM 87/03 З. Service Typ Certified Mai oress Mail C Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 8990 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature 2 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse ND Addresse so that we can return the card to you. B. Received by inted Name) C. Date of Deliver Attach this card to the back of the mailpiece. -03 or on the front if space permits. D. Is delivery address different from item 1? 🗆 Yeş Article Addressed to: If YES, enter delivery address below: 1 No fatse & Cummins 5110 A Shadylane Midland, JX 79703 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9003 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 bootimes **SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY** A. Signatu Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, GREmas or on the front if space permits. D. Is delivery address different from item 1? 🗆 Yes 1. Article Addressed to: No. If YES, enter delivery address below: DHB Partnership 8144 Walnut Hell Lane Suite 992, LO51 3. Service Type Dallas, 2x 75231 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) T Yes 2. Article Number ----7002 2410 0001 0133 9058 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 boottimin COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signatur Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. C Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) ú C. Date of Deliver Attach this card to the back of the mailpiece. 7-12.03 or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: 1 No If YES, enter delivery address below: 12.+9 Trust 4544 Cathedral Drive Dallas, IX 75214 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9010 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Α Sigg ature Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. Addresse Print your name and address on the reverse so that we can return the card to you. Printed Name C. Date of Deliver Attach this card to the back of the mailpiece. ANO or on the front if space permits. D. Is delivery address different from item 1?
Yes 1. Article Addressed to: If YES, enter delivery address below: No Linda DeCarlo 14516 Casey Lane Lochport, JR 60441 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Fiegistered C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9034 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 nontun SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Signature Somplete 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. B. Received by Printed Na Attach this card to the back of the mailpiece, Veemai or on the front if space permits. D. Is delivery address different inon 1. Article Addressed to: If YES, enter delivery address Irving Deemar Trust Iwing & Deenar, Instee P.D. Box 566 Monton brove, IR 60053 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9041 (Transfer from service label) Domistic Bentah Bille hans and an and an and an and boodtinin COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, 1a or on the front if space permits. 🗆 Yes D. Is delivery address different from item 1/ 1. Article Addressed to: If YES, enter delivery address below NO Brian Nicher 3810 West Connty Road 119 Miellard, IX 79703 000 3. Service Type Certified Mail Registered Merchandis NO M Insured Mail 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9065 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Recept 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTIO A. Signature Complete items 1, 2, and 3. Also complete C Agent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1/ □ Yes 1. Article Addressed to: If YES, enter delivery address below **⊿**No Dianna Dicher OWN 3810 west County Road 118 Miellard, 2x 79703 3. Service Type Certified Mail G Fegistered E Rei Aggeingt for frchandis Insured Mail C.O.D 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9072 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** A. Signature Complete items 1, 2, and 3. Also complete 4 Agent item 4 if Restricted Delivery is desired. х Addresse Print your name and address on the reverse so that we can return the card to you. Date of Delive Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 12 C Yes 1. Article Addressed to: E No If YES, enter delive del 1999 ADE John Dickey 3910 West County Road 118 Midland, 2X 79703 Č 3. Ser jce Type Certified Mail Byaness N Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9089 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 soodton **SENDER: COMPLETE THIS SECTION** COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. □ Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece. 200 8 or on the front if space permits. D. Is delivery address different from item C Yes 1. Article Addressed to: D-No If YES, enter delivery address below: DK Investments 328 East Edgehill Road Selt Lake City, UT 84103 3. Sensiee Type Certified Mail Express Mail Flegistered Return Receipt for Merchandis Insured Mail 🗆 C.O.D 4. Res:ricted Delivery? (Extra Fee) □ Yes Article Number 2002 2410 0001 0133 9096 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete Signature item 4 if Restricted Delivery is desired. Agent X Print your name and address on the reverse 🗋 Addresse so that we can return the card to you. R ceived by (Vrinted Name) C. Date of Deliver Attach this card to the back of the mailpiece, 12 or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YES, enter delivery address below: No Do arthur Dow 324 Gacca, NW Albuquerque, MM 87/05 3. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Ir sured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0101 0133 9102 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 tood COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Sigriature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 🖾 Agent 🔲 Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: **D** No If YIES, enter delivery address below: nn Hone Ennerson, Justee 1495 SW Clifton Yortland, DR 97201 3. Service Type, Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9119 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 وريابغ ماهجنا ظبنته ومتاجوا الاسرار 5000 times COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete ᅿ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse D-Addresse so that we can return the card to you. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, Hudvey Close 7111103 or on the front if space permits. D. Is delivery address different from item 1? C Yes Article Addressed to: If YES, enter delivery address below: 1 No nergen Resources Corp. 2198 Bloomfield Highwar Formington, MM 87401 3. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2 Article Number 7002 2410 0001 0133 9126 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELLVERY DER: COMPLETE THIS SECTION Signature Α. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse so that we can return the card to you. Received by (Printed Name В. te of D Attach this card to the back of the mailpiece, ž tt Cv or on the front if space permits. D. Is delivery address different f Article Addressed to: If YES, enter delivery address Eyealiker Energy Company 4.0. Drawer 25045 Alkuquerque, MM 87125 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis □ Fieaistered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 2 Yes 2. Article Number 7002 2410 0001 0133 9133 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 mane experiments. bood time COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Viadimire Agent Print your name and address on the reverse Addresse so that we can return the card to you. C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. ferent from item 1? 🛛 Yes D, 1. Article Addressed to: If YES, enter delivery address below: No. Josher Clearing Welle Jargo UGM 4.0, Box 5383 Denuer, CO 80217 3. Ser/ice Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9140 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 hoad SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signatur Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addressed so that we can return the card to you. Date of Delivery Attach this card to the back of the mailpiece, NNK or on the front if space permits. D. Is delivery address different from item 1? Dys 1. Article Addressed to: If YES, enter delivery address below: 10 No Jaslen Toundation 4.0. Box 162786 austin, 2× 78716-27 Service Type Certified Mail Express Mail P8 □ Fegistered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9157 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

TE THIS SECTION ON DELIVER SENDER: COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete a C Agent Kimi R item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse 23 so that we can return the card to you. Date of Deliver by (Printed Nar Attach this card to the back of the mailpiece, ê or on the front if space permits. □ Yes ferent from 1. Article Addressed to: If YES, enter delivery address below: 1 No Celeste Jasken Management Junct Jo Wells Jargo 1.0. Box 5383 Denver, CO 80217 3. Service Type Certified Mail Express Mail Fiegistered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 3001 0133 9164 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boor time COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signatur Complete items 1, 2, and 3. Also complete C Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. Date of Deliver Attach this card to the back of the mailpiece, loo or on the front if space permits. D. Is delivery address different from item 1? T Yes 1. Article Addressed to: D No If YES, enter delivery address below: Frank andrew Jasken 4095 Sunset View Paris, 2X 75460 Service Type З. Certified Mail Express Mail □ Fiegistered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9171 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 bood time COMPLETE THIS SECTION ON DELIVERY SENDER. COMPLETE THIS SECTION Signatur Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: B.K. Jasken 230 Johnson Woods Druie Paris, IX 75460 If YES, enter delivery address below: 1 No 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Flegistered Insured Mail C.O.D. 4. Res ricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9188 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

TE THIS SECTION ON DELIVERY COM SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete ladir. 12 - 🗖 Agent item 4 if Restricted Delivery is desired. Х L Addinesse Print your name and address on the reverse so that we can return the card to you. B. Reć ate of Delive Attach this card to the back of the mailpiece, or on the front if space permits. D. Is deli erent from item 1? Yes 1. Article Addressed to: Murrag+ Celeste Fashen Irust clo Welle Jargo Dank ·f. V. Box 5383 If YES, enter delivery address below: 3. Service Type Denver, CO 80217 Certified Mail Express Mail F egistered Return Receipt for Merchandis Insured Mail C.O.D. 4. Resiricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9195 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 sodune COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signatur Complete items 1, 2, and 3. Also complete 🗔 Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. B. Reci ved by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 🛛 Yes 1. Article Addressed to: JZ No If YES, enter delivery address below Steven trice Jasken Kevocable must end 8 Steven frice Jashen, Instee 4.0. Box 6088 Colorado Spring, CO 20934-60893. Service Type Certified Mail □ Fegistered Ø erchandis Insured Mail C.O.D 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9201 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boodton COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: If YES, enter delivery address below: -ENo Leil Living Irust Marie a Leil Successor Irustee 6096 lipland Terrace S. 3. Service Type Seettle, WA 98118 Certified Mail Express Mail Flegistered Return Receipt for Merchandise Insured Mail C.O.D. 4. Res:ricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9218 (Transfer from service label PS Form 3811, August 2004 1111111 Dunestic Hellen Hellen III 102595-02-M-1C

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item /? T Yes 1. Article Addressed to: Ø № If YES, enter delivery address below: Jach R. Felter 5501 Prazon Street, NE albuquerque, MM 37111 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.P. 4. Restricted Delivery? (Extra-Fee) Yes 2. Article Number 7002 2410 0001 0133 9225 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1 boodtem COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Sigrature Complete items 1, 2, and 3. Also complete 🛛 Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Address so that we can return the card to you. C. Date of Delive ived by (Printed Na Attach this card to the back of the mailpiece, DPI or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: © 🖓 🖓 If YES, enter delivery address b Filame Royatties P.O. Box 702281 ane Julsa, OK_ 74170-2281 3. Service Type Certified Mail Flegistered 12 R chandis C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9232 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 Spoctum COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signati Agent Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: iving Inst Wing Inst R 6100 #576 If YES, enter delivery address below: 12 No Service Type Kitland MM 97417 3. Certified Mail Express Mail □ Registered Return Receipt for Merchandis C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9249 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. 1 X Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delive: Attach this card to the back of the mailpiece, 1.1 or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: D No If YES, enter delivery address below: Jour Star Oil + Sas Company 4.0 Box 845896 Dallas, IX 75284-5896 Service Type З. Certified Mail Express Mail Return Receipt for Merchandis □ Fegistered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9256 (Transfer from service lab PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boodtimes SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete Signatu item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. Received by (Printed Name) Dete of Delive Attach this card to the back of the mailpiece, MELIUNDINGSL A or on the front if space permits. D. Is delivery address different from item 1? - U Yes 1. Article Addressed to: 🗊 🗖 No If YES, enter delivery address below: b. R. Fundingsland, Jr. T.O. Box 1157 Littleton, CO 80160-1157 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Ir sured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0101 0133 9263 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 and what's Statistic boottimes COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete Α. C Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse - Addresse so that we can return the card to you. B. Received by (Inted Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 🗆 Yes 1. Article Addressed to: 1 No If YES, enter delivery address below: Source Mar JUE 1 5 2003 h of Ohla 1.0. Dox 1588 3. Service Type Julsa, DK 74101 Certified Mail Express Mail □ Fegistered Return Receipt for Merchandis. Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9270 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Sigrature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. □ Address Print your name and address on the reverse so that we can return the card to you. Received by (Printed Name) C. Date of Delive Attach this card to the back of the mailpiece, (-c. POS 'ada C. or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YES, enter delivery address below: -ENO bates Properties, Etcl. -P.O. Box 81119 Mielland, JX 79708-1119 3. Service Type Certified Mail Express Mail □ Flegistered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 1001 0133 9287 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-1 boottimes SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete A. Signature Agent Agent item 4 if Restricted Delivery is desired. X M Duslu Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, Mary Geisler 7115103 or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: 1 No If YES, enter delivery address below: Seisler Family Ltd Partnerskep clo Suisler hoperty mgnt. Corp. 4706 North Lindhurst are. 3. Service Type Wallas JX 75229-6519 Certified Mail Express Mail Registered Return Receipt for Merchandis Ir sured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9294 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boating **SENDER:** COMPLETE THIS SECTION COMPLE E THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (, Varne) ofDeliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? Article Addressed to: If YES, enter delivery address below: No lenn L. Seatle Living Irust beorge 71. Sidlahe + willie Florton Juster 635 Via Santa Cruz 3. Service Type Vista, CA 92083-6336 Certified Mail Express Mail Fegistered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) T Yes 2. Article Number 7002 2410 0001 0133 9300 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

₽∩∩ atene COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete Α. Signjatur Agent item 4 if Restricted Delivery is desired. х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is de ivery address different from item 1? 🛛 Yes 1. Article Addressed to: If YES, enter delivery add D No s below: Charles B. Songeles P.O. Drawer 2509 unda Senta Fe, MM 87504-2509 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 7002 2410 0001 0134 0344 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boort in SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. . 🗖 Age Print your name and address on the reverse AA so that we can return the card to you. by (Printed Name) C. Date of Deliver lived Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: **D**No If YES, enter delivery address below: breen Ribbon she. 46-5 Est hilliendell + Marienhoj St. Shorkes, US Virgin Islands, 00802 3. Service Type Certified Mail Express Mail □ Fegistered Return Receipt for Merchandis-Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 (001 0133 9317 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: 1 No James + Estelle Flaefele 7000 Ranger Drive Chezenne, WG 82009 3. Service Type Certified Mail Express Mail □ Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 1001 0133 9324 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Recept 102595-02-M-1(

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Aiso complete 🗆 Agent item 4 if Restricted Delivery is desired. X Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Nag ate of Deliver 8. Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address 1. Article Addressed to: If YES, enter delive Hanson-Mabride Petroleum Co. a. new Mexico Limited Purthership f.o. Box 1515 3. Service Type foswell, MM 88201-1515 Certified Mail Express Mail Registered Return Receipt for Merchandis C.O.D. Ir sured Mail 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9331 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 Scottin COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signature Α. Complete items 1, 2, and 3. Also complete C Agent item 4 if Restricted Delivery is desired. Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Prig C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: 2 No If YES, enter delivery address below: Hardin-Simmons University No Baptiet Jourdation of Sexas 1601 Blm, Suite 1700 3. Service Type Dallas, 2x 75201-7241 Certified Mail Express Mail Return Receipt for Merchandis □ Flegistered Insured Mail C.O.D. 4. Res ricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 (001 0133 9348 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 booltin COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** N. SignaturemiR Complete items 1, 2, and 3. Also complete Ge/ja item 4 if Restricted Delivery is desired. Agent Addresse Print your name and address on the reverse so that we can return the card to you. C. Date of Delivery nteri N Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? U Yes If YES, enter delivery address below. Do an tasken Hartin 40 Welk Jargo P. O. box 5383 Denver Co 80217 3. Service Type Certified Mail Express Mail Fegistered E Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9362 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

ETE THIS SECTION ON DELIVERY COM SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse □ Addresse so that we can return the card to you. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 25/02 ouchin or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: 1 No M.g. +W.g. Flarvey 1.0. Bex 12705 Dollar ix 75225 3. Service Type Certified Mail Express Mail □ Fegistered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9379 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 a secondaria 1. Land Desetting COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** A. Sigrature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Addresse Print your name and address on the reverse so that we can return the card to you. by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, TOUCILIN <u>28 10</u>3 or on the front if space permits. D. Is delivery address different from item 1? 🗖 Yes 1. Article Addressed to: No No If YES, enter delivery address below: Mg Flarvez, Jr. 4.0. Box 12705 Dallas, IX 75225 3. Service Type Certified Mail Express Mail G Flegistered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9386 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 time/ SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. Is delivery addres tem 1? □ Yes different from 1. Article Addressed to 12 No If YES, enter delivery address below: William R. Hendley P.O., Box 45373 Rio Paneho, NM 37174 3. Senice Type Certified Mail Express Mail Fiegistered Return Receipt for Merchandise Insured Mail C.O.D. 4. Rescricted Delivery? (Extra Fee) D Yes 2. Article Number 7002 2410 1001 0133 9393 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

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2. Article Number	Registered Return Receipt for Merchandise Insured Mail C.O.D. Restricted Delivery? (Extra Fee) Yes
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 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: 	Derivery 11 COMPLETE THIS SECTION ON DELIVERY A. Signature X March 1 Addresse B. Received by (Printed Name) Q. Date of Deliver March 1 Addresse D. Is delivery address different from item 1? If YES, enter delivery address below:
Mary ann Floney 10 303 Ocotello Drive Sun Citz, az 85373	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
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h	od times
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COMPLETE THIS SECTION ON DELIVERY BENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. A. Signature Xiladimie Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Re C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. different from item 1? C Yes 1. Article Addressed to: If YES, enter delivery address below: No Kolun Hood do welle Jargo f.O. Box 5383 3. Service Type Denver. CO 80217 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9430 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boodtines COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** A. Signatur Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent X Print your name and address on the reverse Addresse so that we can return the card to you. ate of Deliver Attach this card to the back of the mailpiece, 42 or on the front if space permits. Ves D. Is delivery address different from item 1? 1. Article Addressed to: 1 No If YES, enter delivery address below: Wedley J. House Bedford Drive land, IX 79701-4110 Service Type 3. Certified Mail Express Mail Registered Return Receipt for Merchandis C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9447 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 bootton COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Siggature Α. Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. х 🗍 Addressee Print your name and address on the reverse so that we can return the card to you. Date of Deliver B. Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? LLL Article Addressed to: E No If YES, enter delivery address below: rie M. Huch yo Virginia M. Breecher 23430 W. Cattail Lane 3. Service Type mator Ih 60010 Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) \ Yes 2. Article Number 7002 2410 0001 0133 9454 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

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COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature Agent item 4 if Restricted Delivery is desired. XIV Thille Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by / Printed Name C. Date of Deliver Attach this card to the back of the mailpiece, LUIN JACABS or on the front if space permits. D. Is delivery address different from item 1? 🖸' Yea Article Addressed to: If YES, enter delivery address below: 1 No Jim L. - Mary Low Juchs Leving June 3505 Crescent Quenue Farminaton, MM 87401 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 🗆 Yes 2. Article Number 7002 2410 0001 0133 9461 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 hridtin COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature Agent item 4 if Restricted Delivery is desired. х Print your name and address on the reverse Addresse 10 so that we can return the card to you. Date of Deliver B. Received by (Printed Name) Attach this card to the back of the mailpiece, N/03 or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: 1 No If YES, enter delivery address below: Therese Kauglarich 13723 Souta Fe Trail Orland Park, It 60462. 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9478 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 hoodenies COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name, C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 🗆 Yes 1. Article Addressed to: If YES, enter delivery address below: 1 No Kelly Kevocakele Irust f.o., Box 2097 Chegenne, WG 82003 З. Service Type Certified Mail Express Mail Registèred Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9485 (Transfer from service label) Domestic Return Receipt 102595-02-M-10

PS Form 3811, August 2001

bore ittus COMPLETE THIS SECTION ON DELIVERY **SENDER:** COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4,if Restricted Collivery is desired. XS Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, Koberts or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: 12 No Barron U. Kield 3838 Oak Lawn Cure., Suite 725 Dellas 2x 75219 3. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9515 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Deen COMPLETE THIS SECTION ON DELIVERY SENDER COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete Signature 16 🗆 Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. Date of Deliver ceived by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 🗆 Yes 1. Article Addressed to: 12 No If YES, enter delivery address below: Joe Kirn 1645 Court Place # 201 Derwer, CO 80202 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.Q.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9522 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. □ Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. В. ed by (Printed Name) C. Date of Deliver Rece Attach this card to the back of the mailpiece, 490 or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YÉSS onter denuer address below: -D No Harry + Sharon Lane Luing Ime Sharon M. Lane, Irustee 8740 FAJ ZUU. -10. Box 243 З. Service Type Jarmington, MM 87499-0243 Express Mail Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9546 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Soottin COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name C. Date of Deliver Attach this card to the back of the mailpiece, フー1 わーび Hernande or on the front if space permits. 1. Article Addressed to: If YES, enter delivery address below: No William M. Lansdale -P.O. Box 27 Seal Beach, CA 90740 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 7002 2410 0001 0133 9553 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 and the states a sand first the Soodting COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 5 Print your name and address on the reverse Z Addresse so that we can return the card to you. C. Date of Delivery Received by (Printed Name) Attach this card to the back of the mailpiece, 1 2 2000 or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: **D**No Charles Rongcope, Jr. 7157 Juze Waz Walles 2x 75225 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 7002 2410 0001 0133 9577 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER; COMPLET E THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse so that we can return the card to you. B Reke Namel Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1. Article Addressed to: 1 No If YES, enter delivery address below: tel Lorecope 400 W. Alophins St., Suite 101 San Marcos, 2× 73666-4463 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Dervery? (Extra Fee) □ Yes 2. Article Numbe ዲገቢላ ወቢቲካ 2002 0133 9584 (Transfer from PS Form 3811, August 200 Domestic Return 102595-02-M-10 brodtethes COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Tona Print your name and address on the reverse so that we can return the card to you. Received by (Printed N Date of Belive Attach this card to the back of the mailpiece, SAKBARA WCH or on the front if space permits. D. Is delivery address differe m item 1? 1. Article Addressed to: If YES, enter delivery add Kay Kongcope 1312 Travis Flights Blod. Austin, IX 78704 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9591 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 attribute to the state spoottines SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVER A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver, Attach this card to the back of the mailpiece. 52003 or on the front if space permits. D. Is delivery address different from item 1? Ŭ Ye 1. Article Addressed to: If YES, enter delivery address below: JA NO 1. howe hogetty Partners, RP 5,5 4.0. Box 4887 Dept. 4 3. Service Type Floweton, 2x 77210-4887 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9607 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

PLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. -Agent / 🗖 Addresse 2 Print your name and address on the reverse so that we can return the card to you. eceived by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, Ci or on the front if space permits. T Yes D. Is delivery address different from item 1? 1. Article Addressed to: 12 No If YES, enter delivery address below: Jomes M. + Blanche D. Martin 943 T avenue Rural Poute 1 Dox 321 3. Service Type Conneil Sieve, KS 66846-8777 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2 Article Number 7002 2410 0001 0133 9621 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Scort. COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. C Agent a Print your name and address on the reverse - Addresse so that we can return the card to you. Date of Deliver B. Received by (Printed Name) Attach this card to the back of the mailpiece, 7-14-03 or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: **Ø** No etride Del + Sus Corp. 0. Box 1515 Roswell, MM 88202-1515 З. 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 7002 2410 0001 0133 9638 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 1. 1. A. 2. P. 18 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. C. Date of Deliver B. Received by (Printed Name) Attach this card to the back of the mailpiece, EHROM 14-03 or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: E No Frank J. Messide Inst#1 No Surflower Bank F.O. Dax 800 Selina, KS 67401-0800 3. Service Type Cortified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9645 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

SENDER COMPLETENES SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by Date of Deliver Printed Non Attach this card to the back of the mailpiece, TOHN MEDONGA 7-17-03 or on the front if space permits. D. Is delivery address different from item 1? 🛛 Yes 1. Article Addressed to: 2 No If YES, enter delivery address below: John W. McDougall P.O. Box 267997 Neston, IX 33326 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 7002 2410 0001 0133 9652 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 hond TAN COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. M4 Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, T.J. MCKENNA or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: If YES, enter delivery address below: Z No. Deborah M. Mekenna 7555 South Buscary Street aurora, CO 30016 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9669 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 bootthes COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Acent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D, Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address belo Robert M. Miller 5358 South Flavana Court Englewood, CD 80111 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9676 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1; 2, and 3. Also complete A. Sign Agent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse 5. so that we can return the card to you. B. R C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? Ď 1. Article Addressed to: If YES, enter delivery address below: 1 No Uhlahoma Uil Co atth: wheeler Slare 4925 Sieewille ave. Sinte 717 3. Service Type Callon JX 75206 Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 🗆 Yes 2. Article Number 7002 2410 0001 0133 9706 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 bordtin SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 🛛 Yes 1. Article Addressed to: 12 No If YES, enter delivery address below: Maurice - Korraine alleon Jarnen Street Quala, 76 68102 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9713 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. В₁ C. Date of Deliver Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1 1. Article Addressed to: D No If YES, enter delivery address below: Rosemarie Ottil 1847 noel Place ly Flills, CA 90210 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 7002 2410 0001 0133 9720 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

		1 Martin Contractor
• • • • • •	 SENDER: COMPLETE THIS SECTION. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
- - -	 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. 	By Received by (<i>Printed Name</i>) C. Date of Delive. D. Is delivery address different from item 1? Yes
	1. Article Addressed to: Ben M. Litterson, Jr.	If YES, enter delivery address below:
	ben M. Latterson, Jr. 613 NW Loop 410, Suite 630 Sen autorio, 2X 78216	
	Sen antonio, IX 10216	3. Service Type
		Registered Return Receipt for Merchandis Insured Mail C.O.D. Yes
	2. Article Number	
$(x_1, x_2, \dots, x_n) \in \mathcal{H}^{n-1}(\mathbb{R}^n) \to \mathbb{R}^n \to \mathbb{R}^n \to \mathbb{R}^n$		
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	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature X Agent Addresse
	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.	B. Received by (Printed Name) C. Date of Deliver Care Philips 7/153 D. Is delivery address different from item 1? \Box Yes
	1. Article Addressed to: Clare M. Phillips	If YES, enter delivery address below: DNo
	Clare M. Abillips 1315 & Dello Circle Rockport, IR 60441	
	Kockport, ux born	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis
		Insured Mail C.O.D. A. Restricted Delivery? (Extra Fee) Yes
	2. Article Number 7002 7	410 0001 0133 9744
	(Transfer from service label) I u u u PS Form 3811, August 2001 Domestic Ref	
	borttu	A ba
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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	 Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: 	D. Is defivery address different from item 1? Yes
	Janus Hullips	If YES, enter delivery address below: D No
	Janus Hullips 3400 Bob-O-Link Deaton, IX 76209	
		3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D.
		4. Restricted Delivery? (Extra Fee)
		10 0001 0133 9751
	PS Form 3811 August 2001 Domestic Bet	ure Receipt 102505 02 M 10

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVER A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Address so that we can return the card to you. B. Received # (Printed Name) C. Date of Delive Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1?
 Yes Article Addressed to: ston Hellow United Meth Chu If YES, enter delivery address below: DNo 315 Walnut Hill Jane Dalles IX 75230 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2 Article Number 7002 2410 0001 0133 9768 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Southing COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Х 2 rd Ad Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delive Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: 12 No If YES, enter delivery address below: Fuchett Energy Company 5460 South Quebec St., Suite 250 Sceenwood Village, Co 80111-1917 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 7002 2410 0001 0133 9775 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 1. 1. 1. 1. 1. 1. 1. 1. bmd TMU COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** A. Signature Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by Printed Nan C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1. Article Addressed to: If YES, enter detivery address below Resource Enterprises the. 345 Bast 4500 South, Suite 300 JUL 1 4 2003 Solt Lake City, UT 84107 3. Service Type Certified Mail D Profess Mail C Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 9805 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signatura Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Mle Print your name and address on the reverse - 🗖 Addresse so that we can return the card to you. ceived by (Printed Name) C. Date of Delive R Attach this card to the back of the mailpiece, KOAYK or on the front if space permits. D. Is delivery address different from item 1? Yes Article Addressed to: 1 If YES, enter delivery address below: No I. Partnership, Ltd 755 S Elizabeth Denver, CO 20209 3. Service Type Certified Mail Express Matt Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. F 1 PS 102595-02-M-10 boal twin COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Gomplete¹ tems 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Addresse Print your name and address on the reverse so that we can return the card to you. B. Receive Printed Name) Date of Deliver Attach this card to the back of the mailpiece, 1161 15 or on the front if space permits. Ves D. Is delivery address different from item 1? 1. Article Addressed to: D-No If YES, enter delivery address below: Melvin Robins P.O. Drawer 2225 Albuquerque, MM \$7102 Service Type 3. Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0133 9812 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 booltimes COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. C Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, Billie Robinstration or on the front if space permits. □ Yes 1. Article Addressed to: If YES, enter delivery address below 1 No Billie Lobenson P.O. Box 1281 Santa Fe, MM 37501-1281 З. Servjæe Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 9829 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Aiso complete C Agent item 4 if Restricted Delivery is desired. Y Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 114/03 or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: 1 No If YES, enter delivery address below: Kattileen Koman P.O. box 1055 Suena Vista, Co 31211 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 7002 2410 0001 0133 7061 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boottems COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete 🗆 Aaent item 4 if Restricted Delivery is desired. Addresse Print your name and address on the reverse so that we can return the card to you. ceived by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, KOLA KUBOL or on the front if space permits. D. Is delivery address different from item 1? □ Yeş 1. Article Addressed to: If YES, enter delivery address below: **E**No James + nichola Kubaw 200 S. Main Street Contee, MM 87410 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 7002 2410 0001 0133 7078 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 boottimes COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent XV Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. □ Yeş D. Is delivery address different from item 1? Article Addressed to: San Juan Basin Reperties, LLC 1499 Blake Street #7K -ETNO If YES, enter delivery address below: Denver CO 80202 З. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0133 7085 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-1C

COMPLETE THIS SECTION ON DELIVERY ENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete 🛱 Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Penned Name) C. Date of Deliver Attach this card to the back of the mailpiece, 4 2003 or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: -D No If YES, enter delivery address below: John Wellon Sapp 1993 Trust Chase Back of Depas, Trustee P.O. Box 201984 3. Service Type Heuston, 2x 77216-1984 E Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 2005 5470 0007 0733 2709 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 COLUMN COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent х Addresse Print your name and address on the reverse so that we can return the card to you. Pate of Deliver B. Received by (Pointed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? C Yes 1. Article Addressed to: E No If YES, enter delivery address below: Mary Margaret Sapp 1993 Just Chase Dank of Deyas, Irustee P.O. Box 201884 3. Service Type Flourston, JX 77216-1884 Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0133 6828 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 **SENDER:** COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. □ Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. Date of Deliver B. Received by (Printed Name) JU Attach this card to the back of the mailpiece, or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: 1 No William Dean Sepp 1993 Inot If YES, enter delivery address below: Chase bend of Seyas, Sunder f.o. Box 201984 Flewaton, JX 77216-1884 3. Service Type Certified Mail Express Mail Ci>□ Registered Return Receipt for Merchandis D Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes ~ 2. Article Nümber 7002-2410 <u>00</u>01 0134 0092 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receip 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Dolivery is desired. X Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by C. Date of Deliver Attach this card to the back of the mailpiece. Saran or on the front if space permits. D. Is delivery address different from item 1? 7 1. Article Addressed to: If YES, enter delivery add Sealy + Company, XP 1.0. Box 9557 Fort Worth , IX 76147 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) T Yes 2. Article Number 7002 2410 0001 0134 0108 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 Societa COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, JUL 1.6 2003 or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YES, enter delivery address below: 10 No SECO Energy Corp. 1201 Broadway, Suite 900 Denver, CO 30202 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0134 0115 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 in a short Salt in **SENDER:** COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete Signature item 4 if Restricted Delivery is desired. 🗆 Agent Xί Print your name and address on the reverse D Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delive Attach this card to the back of the mailpiece. or on the front if space permits. D. Is delivery address different from item 1? 🛛 Y98 1. Article Addressed to: If YES, enter delivery address below: E No Susan C. Sheridan 151 South Sirch Street Denver. CO 30246-1016 3. Service Type Certified Mail Express Mail Registered - Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0122 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. Х 5 Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver C Attach this card to the back of the mailpiece, 4 2003 or on the front if space permits. 🔲 Yeş D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: GA No Stemp Lamily Junet #150 1172 llian Slenp+ Chase Buck P.D. Box 201884 Heuston IX 77216-1884 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) D Yes 2. Article Number 7002 2410 0001 0134 0139 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 5000 tone SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Gomplete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. □ Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Beceived by hted Name) C. Date of Deliver Attach this card to the back of the mailpiece, SPEAN or on the front if space permits. D. Is delivery address different from item 1?
Yes 1. Article Addressed to: If YES, enter delivery address below: JA No Howell + Mary Man Spear DBA Prinder 10:1 + Sus Co. vard To: * MIDI **Box 1684** ss Mail and, Texas 79702 n Receipt for Merchandis 4. Re C Yes 2. Article Number 7002 2410 0001 0134 0146 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 bootting COMPLETE THIS SECTION ON DELIVERY 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. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 1401 (Trahen VQ' 10 or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: 1/No If YES, enter delivery address below: Viola I. Stewart PD. Box 291245 Kerwille, 2X 78029-1245 3. Service Type Certified Mail Express Mail [] Registered Return Receipt for Merchandis I instroid Ma C.O.D. P Restricted DOR y? (Extra Fee) T Yes 2. Article Nur 7002 2¥‰0 Ю801≶0134 0153 (Transfer from convice tabel) PS Form 3811, August 2001 Domestic Return 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS BECTION A. Signature Complete items 1, 2, and 3. Also complete) 🗖 Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse £ Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Delive Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? Yee Article Addressed to: If YES, enter delivery address below: I No No 10 19456 nassau Curora, (30 800 Service Type Certified Mai 🗖 Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 私になるよう 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0134 0160 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 herd COMPLETE THIS SECTION ON DELIVERY **SENDER:** COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. . D Agent Print your name and address on the reverse Addresse so that we can return the card to you. C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 12 1. Article Addressed to: If YES, enter delivery address b iolet Graves Stubbenar clo Daviel Stubbeman P.O. Box 3473 3. Service Type apilene, IX 79604 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0177 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Sportenes SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete 諁 G.4 aent item 4 if Restricted Delivery is desired. X Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printe Deliver Attach this card to the back of the mailpiece, 1 SA or on the front if space permits. D. Is delivery address dif 1. Article Addressed to: If YES, enter delivery ad **Paida**b Lisa Sweenes 152 Mary Lynn Lane Newman, Sle 30265 3. Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7002 2410 0001 0134 0184 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse C Addresse so that we can return the card to you. Date of Deliver B. Received by Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: Ø No If YES, enter delivery address below: Tilla Jernes 1275 Sierra Ridge New Lenox, JK 60451 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0134 0207 (Transfer from service labe 102595-02-M-10 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) 2003 Attach this card to the back of the mailpiece, Ð or on the front if space permits. 🗆 Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: E No Leyas Commerce Benk, Instel Aert 5067200 RO Box 209871 Howiton, 2x77216-9871 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 2 Yes 2. Article Number 7002 2410 0001 0134 0214 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete A. Signatur item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. B. Received by (rinted Name 5 C. Date of Attach this card to the back of the mailpiece. or on the front if space permits. Is delivery address differe 44bm item 1. Article Addressed to: If YES, enter delivery ad below Rosita Irugello J.O. box 1225 ī Chegenne, WZ 92003 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0221 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Â Complete items 1, 2, and 3. Aiso complete Agent item 4 if Restricted Delivery is desired. X Print your name and address on the reverse Addresse so that we can return the card to you. B Rece d by (Printed Name Attach this card to the back of the mailpiece, or on the front if space permits. □ Yes D. Is delivery address different from item 1 1. Article Addressed to: 12 No If YES, enter delivery address below: Norethy J. Incher Inst 200 Cascade ave Chezenne, Wy 32009 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0238 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Bontto COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A -Aaent item 4 if Restricted Delivery is desired. Х Addresse Print your name and address on the reverse so that we can return the card to you. в. C. Date of Deliver Attach this card to the back of the mailpiece, 14-03 or on the front if space permits. very address different from item 1? C Yeş 1. Article Addressed to: enter delivery address below: Secre Volis 519 Slen arbor Susse Pointe, MI 2001 41236 З. Se Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) T Yes 2. Article Number 7002 2410 0001 0134-0245 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 Sportimer COMPLETE THIS SECTION ON DELIVERY **SENDER:** COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. C Agent Print your name and address on the reverse Addresse so that we can return the card to you. ate of Deliver B. Received b / Printed Nam Attach this card to the back of the mailpiece, or on the front if space permits. 2 Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: Westway Letro 500 n. alard, Suite 200 Wallas, 2x 75201 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0252 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature C Agent item 4 if Restricted Delivery is desired. X Addresse Print your name and address on the reverse so that we can return the card to you. B C. Date of Deliver eceived by (Printed Name) Attach this card to the back of the mailpiece, 7/14/03 ane. 123 eland or on the front if space permits. D. Is delivery address different from item 1? □ Yes 1. Article Addressed to: -E No If YES, enter delivery address below: William K. Wieland 7831 academy Irail alpuquesque. Service Type З. Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0134 0269 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 Routine COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete C Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addresse so that we can return the card to you. Name) C. Date of Deliver Attach this card to the back of the mailpiece, -15-02 or on the front if space permits. □ Yes Is delivery address different from item 1? Article Addressed to: If YES, enter delivery address below DA No TXDOW Jack B. Wilkinson, Jr. 4.0. box 305 Midland, IX 79702 Seprice Type З. Certified Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 🗋 Yes 2. Article Number 7002 2410 0001 0134 0276 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 And the day of the state Sood + THV SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. C Agent Print your name and address on the reverse Addresse so that we can return the card to you. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 2-03 or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: 1 No J. L. Williams 7700 La Cordera NE albuquerque, MM 87110 Service Type 3. Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0283 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 4

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SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A, Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) Date of Deliver Attach this card to the back of the mailpiece, 16 10 3 or on the front if space permits. D. Is delivery address different from item 1? D'Yeş 1. Article Addressed to: If YES, enter delivery address below: martha K. Williamson 4949 Skillman #155 Dallas, 2× 75206 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 7002 2410 0001 0134 0290 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boselitis **SENDER:** COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Print your name and address on the reverse Addresse so that we can return the card to you. в eived by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, Brownir or on the front if space permits. D. Is delivery address different from item 1? 🗇 Yeş 1. Article Addressed to: D-No If YES, enter delivery address below: Suy M. Willis P. D. Box 923447 Wallas, 2X 75382 3. Service Type Certified Mail Express Mail C Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7002 2410 0001 0134 0306 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10 641 St. 1. 1. 3 1. 5 produme COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete Items 1, 2, and 3. Also complete 77 C Agent item 4 if Restricted Delivery is desired. Χ Addresse Print your name and address on the reverse so that we can return the card to you. В. Received by (Printed,Name) C. Date of Deliver 1 Attach this card to the back of the mailpiece, 7-/14-0≣ olden or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: If YES, enter delivery address below: JE No atti feel Wood P.O. Box 1099 Rising Star, 2x 76471 3. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7002 2410 0001 0134 0313 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10

hood think COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Print your name and address on the reverse Addresse so that we can return the card to you. в. C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1 Article Addressed to: **⊿**∕No If YES, enter delivery address below: low Kilbon Inc. , Dox 6901 penner, Co 80206 3. Service Type Certified Mail Express Mail Return Receipt for Merchandise Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 2002 2410 0001 0134 0320 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10 boottin **COMPLETE THIS SECTION ON DELIVERY** SENDER: COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete Α. 'n. Agent item 4 if Restricted Delivery is desired. Х Print your name and address on the reverse Addresse so that we can return the card to you. eceived by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 7-1423 or on the front if space permits. Ves-D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: **No** Richard Zimmernan Clo advantage Trust Company P.O. Dox 1337 3. Service Type alina, KS 67402-1337 Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7002 2410 0001 0134 0337 (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-10