

Over-Riding
Royalty
Interest
Owners

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:

ABC Del + Gas Properties
3208 Boyd
Midland, TX 79705

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8778

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-06

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Darleen Cockburn* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

DARLEEN COCKBURN 7-14-01

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Bernice Adams
9743 Bon Haven Lane
Dwight Mills, MD 21117

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8785

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-06

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. Bernice Adams* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David + Rebecca Albanese
2301 Whitcomb Place
Jalls Church, VA 22046

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8792

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-06

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *David Albanese* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Altroz Resources Company
6901 East Walsh Place
Denver, CO 80224

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8808

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-08

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Anne Amato
37290 Stanton Point Road
Ingleside, TX 60041

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8815

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-08

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

A.G. Andrikopoulos Res. Inc.
P.O. Box 788
Cheyenne, WY 82003

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8761

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-08

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Judy & Andy Andrikopoulos
P.O. Box 350
Daniel, WY 83115-0350

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0375

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Judy Andrikopoulos* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

JUDY ANDRIKOPOULOS ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

102595-02-M-10

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:

Apache Corporation
P.O. Box 840133
Dallas, TX 75284-0133

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8839

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *R. A. Leamer* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

JUL 14 2003 ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

R. Zucker Attorneys
P.O. Box 2351
Bartlesville, OK 74005

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *R. Zucker* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

HUGHANNA PAVONE ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8846

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Beleo Development Corp
c/o Exxon Oil & Gas Co.
P.O. Box 840321
Dallas, TX 75284-0321

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8860

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Martha Nobles Black
c/o Wells Fargo
Attn: OGAM Administration
P.O. Box 5383
Denver, CO 80270

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8884

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Martha N Black Family Trust
c/o Wells Fargo Bank
Attn: Oil & Gas Trust Dept.
40 NE Loop 410, Suite 300
San Antonio, TX 78216

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8877

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *R. Hever*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Martha N Black*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- ☒ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☒ Print your name and address on the reverse so that we can return the card to you.
- ☒ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alexander S. Bowers Estate
Robert M. Musselman, Executor
P.O. Box 254
Charlottesville, VA 22902

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8891

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-100

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- ☒ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☒ Print your name and address on the reverse so that we can return the card to you.
- ☒ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BP America Production Co.
P.O. Box 3092
Houston, TX 77253

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0351

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- ☒ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☒ Print your name and address on the reverse so that we can return the card to you.
- ☒ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

V.M. Breecher
23430 Cattail Lane
Barrington, IL 60010

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8907

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Laura R. Schaller Brennan
P.O. Box 1333
Buies Creek, NC 27506

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8914

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

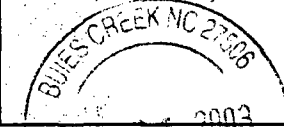
COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
X *[Signature]* ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wanda Burness
75535 Fern Hill Road
Rainier, OK 97048

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8921

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
X *[Signature]* ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lewis O. Campbell
P.O. Box 51508
Albuquerque, NM 87181-1508

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8938

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

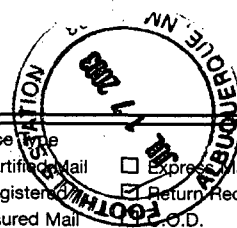
COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
X *[Signature]* ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

B.K. + D.L. Carpenter
2935 Nob Hill Drive
Casper, WY 82601

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8945

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X D.L. Carpenter

☐ Agent☐ Addressee

B. Received by (Printed Name)

D.L. Carpenter

C. Date of Delivery

7-14-03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kathleen Colwell
2254 Shawnee South East
Grand Rapids, MI 49506

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8952

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Kathy Colwell

☐ Agent☐ Addressee

B. Received by (Printed Name)

Kathy Colwell

C. Date of Delivery

7-17-03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cometra Oil + Gas Inc.
210 West 6th St., Suite 1001
Fort Worth, TX 76102

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8969

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J. Maguire

☐ Agent☐ Addressee

B. Received by (Printed Name)

J. Maguire

C. Date of Delivery

7-14-03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jane H. Cotter
6625 Barker Place, NE
Albuquerque, NM 87109

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8976

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jane Cotter ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Jane Cotter ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Cramer Oil
410 17th Street, Suite 340
Denver, CO 80202

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8983

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X K Borusich ☐ Agent
☐ Addressee

B. Received by (Printed Name)

K BORUSICH ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Cuesta Production Company
P.O. Box 451
Albuquerque, NM 87103

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 8990

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X SFL ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Susan Flanagan ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Patsy K. Cummins
5110 A Shadylane
Midland, TX 79703

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9003

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Patsy K. Cummins ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-19-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DHB Partnership
8144 Walnut Hill Lane
Suite 982, L651
Dallas, TX 75231

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9058

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J. G. Brown ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-14-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

D. + J Trust
4544 Cathedral Drive
Dallas, TX 75214

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9010

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X D. Langley ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-12-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Linda DeCarlo
14516 Casey Lane
Rockport, IL 60441

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9034

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Irving Deemar Trust
Irving R. Deemar, Trustee
P.O. Box 566
Morton Grove, IL 60053

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9041

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Brian Dickey
3810 West County Road 118
Midland, TX 79703

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9065

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent☐ Addressee

B. Received by (Printed Name)

Bill P. Cantlo

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent☐ Addressee

B. Received by (Printed Name)

Sharon Deemar

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dianna Dickey
3810 West County Road 118
Midland, TX 79703

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9072

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dianna Dickey* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Dianna Dickey

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Dickey
3810 West County Road 118
Midland, TX 79703

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9089

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dianna Dickey* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Dianna Dickey

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

DK Investments
828 East Edgemoor Road
Salt Lake City, UT 84103

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9096

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *DK Investments* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

DK Investments

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Arthur Dow
324 Lucca, NW
Albuquerque, NM 87105

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9102

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Mary L. Dow

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/12

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ann Hone Emerson, Justice
1495 SW Clifton
Portland, OR 97201

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9119

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Ann Hone Emerson

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Energizer Resources Corp.
2198 Bloomfield Highway
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9126

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Andrew Close

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Spealiken Energy Company
P.O. Drawer 25045
Albuquerque, NM 87125

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9133

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X / Hugo Catter

☐ Agent☐ Addressee

B. Received by (Printed Name)

Hugo Catter

C. Date of Delivery

JUN 15 2003

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Tosher Clearing
Wells Fargo UGM
P.O. Box 5383
Denver, CO 80217

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9140

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Vladimir Catter

☐ Agent☐ Addressee

B. Received by (Printed Name)

Vladimir Catter

C. Date of Delivery

JUN 15 2003

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

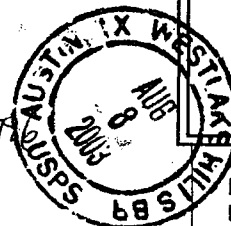
☐ Yes

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:

Tosher Foundation
P.O. Box 162786
Austin, TX 78716-2786



COMPLETE THIS SECTION ON DELIVERY

A. Signature

X / Andrew C. Catter

☒ Agent☐ Addressee

B. Received by (Printed Name)

Andrew C. Catter

C. Date of Delivery

JUN 15 2003

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9157

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Celeste Jackson Management Inst
c/o Wells Fargo
P.O. Box 5383
Denver, CO 80217

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9164

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Vladimir G. F... ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Vladimir G. F... ☐ Yes
C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Frank Andrew Jackson
4095 Sunset View
Paris, TX 75460

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9171

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Kathy Van Noord ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Kathy Van Noord ☐ Yes
C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

B.K. Jackson
230 Johnson Woods Drive
Paris, TX 75460

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9188

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X B.K. Jackson ☐ Agent
☐ Addressee

B. Received by (Printed Name)

B.K. Jackson ☐ Yes
C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Murray + Celeste Jasken Trust
c/o Wells Fargo Bank
P.O. Box 5383
Denver, CO 80217

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9195

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Steven Rice Jasken Revocable Trust
Steven Rice Jasken, Trustee
P.O. Box 6088
Colorado Springs, CO 80934-6088

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9201

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Feil Living Trust, Marie A. Feil
Successor Trustee
6096 Upland Terrace S.
Seattle, WA 98118

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9218

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Jack L. Felter
5501 Drayton Street, NE
Albuquerque, NM 87111

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9225

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jack L. Felter* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Elaine Loyettes
P.O. Box 702281
Tulsa, OK 74170-2281

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9232

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Elizabeth H. Reed* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Elizabeth H. Reed

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Simethy + Carlene Foster
Living Trust
CR 6100 #576
Kitland, NM 87417

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9249

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Simethy + Carlene Foster* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Four Star Oil & Gas Company
P.O. Box 845896
Dallas, TX 75284-5896

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9256

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *K. A. Hemen*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Good Times
B. R. Lundingsland, Jr.
P.O. Box 1157
Littleton, CO 80160-1157

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9263

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *B. R. Lundingsland, Jr.*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Good Times
Daniel C. Sainey Marital Trust
Bank of Oklahoma, Agent
P.O. Box 1588
Tulsa, OK 74101

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9270

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Daniel C. Sainey*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bates Properties, Ltd.
P.O. Box 81119
Midland, TX 79708-1119

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9287

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1

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:

Geisler Family Ltd. Partnership
c/o Geisler Property Mgmt. Corp.
4706 North Lindhurst Ave.
Dallas, TX 75229-6518

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9294

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Blum L. Seattle Living Trust
George H. Suddahs + Willie Horton, Trustees
635 Via Santa Cruz
Tista, CA 92083-6336

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9300

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x / Rob S. Gate

☒ Agent☐ Addressee

B. Received by (Printed Name)

Wanda S. Gates

C. Date of Delivery

7-14-0

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x M. Geisler

☐ Agent☐ Addressee

B. Received by (Printed Name)

Mary Geisler

C. Date of Delivery

7-15-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x [Signature]

☐ Agent☐ Addressee

B. Received by (Printed Name)

Wanda S. Gates

C. Date of Delivery

7-14-0

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-family: cursive;">Charles B. Gonzales P.O. Drawer 2509 Santa Fe, NM 87504-2509</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7002 2410 0001 0134 0344</p>	
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-family: cursive;">Green Ribbon Inc. 46-5 E. Hilliendahl + Marienhoj St. Thomas, US Virgin Islands, 00802</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7002 2410 0001 0133 9317</p>	
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-family: cursive;">James + Estelle Haefele 7000 Ranger Drive Cheyenne, WY 82009</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7002 2410 0001 0133 9324</p>	
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-10</p>	

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:

Hanson-McBride Petroleum Co.
A New Mexico Limited Partnership
P.O. Box 1515
Roswell, NM 88201-1515

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9331

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
☐ Addressee

B. Received by (Printed Name)

[Signature] ☐ Agent
[Signature] ☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes
☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Hardin-Simmons University
c/o Baptist Foundation of Texas
1601 Elm, Suite 1700
Dallas, TX 75201-7241

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9348

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
[Signature] ☐ Addressee

B. Received by (Printed Name)

[Signature] ☐ Agent
[Signature] ☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes
☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Susan Fashen Hartin Trust
c/o Wells Fargo
P.O. Box 5383
Denver, CO 80217

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9362

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
[Signature] ☐ Addressee

B. Received by (Printed Name)

[Signature] ☐ Agent
[Signature] ☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes
☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

M. J. + W. J. Harvey
P.O. Box 12705
Dallas, TX 75225

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9379

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

C. Houchin

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Houchin

C. Date of Delivery

5/28/03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

M. J. Harvey, Jr.
P.O. Box 12705
Dallas, TX 75225

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9386

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

C. Houchin

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Houchin

C. Date of Delivery

7/28/03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William R. Hendley
P.O. Box 45373
Rio Rancho, NM 87174

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9393

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

William R. Hendley

☐ Agent☐ Addressee

B. Received by (Printed Name)

William R. Hendley

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Jeresa Home
2850 Baseline Ave.
Santa Fe, CA 93460

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9409

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

JENNIFER NATION

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Ann Honey
10303 Acetella Drive
Sun City, AZ 85373

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9416

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

MARY ANN HONEY

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Lisa K. Hood
40 Wells Fargo
P.O. Box 5383
Denver, CO 80217

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9423

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

LISA K. HOOD

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Robin Hood
c/o Wells Fargo
P.O. Box 5383
Denver, CO 80217

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9430

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Madeline Gelfand* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Cent ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wesley J. House
1201 Bedford Drive
Midland, TX 79701-4110

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9447

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sheddy House* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

WESLEY HOUSE ☐ Date of Delivery 7/1/02

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Virginia M. Huch
c/o Virginia M. Brecker
23430 W. Cottail Lane
Barrington, IL 60010

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9454

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Stephanie Meyer* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

7/15/02 ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Jim R. & Mary Lou Jacobs Living Trust
3505 Crescent Avenue
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9461

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

MARY LOU JACOBS 7-11-03

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Therese Kauglarich
13723 Santa Fe Trail
Orland Park, IL 60462

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9478

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

7/15/03

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Kelly Livocable Trust
P.O. Box 2097
Cheyenne, WY 82003

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9485

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

7/14/03

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Barron U. Kidd
3838 Oak Lawn Ave., Suite 725
Dallas, TX 75219

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9515

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X B. Roberts

☐ Agent

☐ Addressee

B. Received by (Printed Name)

B. Roberts

C. Date of Delivery

7/14/01

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

If YES, enter delivery address below: ☒ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joe Kinn
1645 Court Place #201
Denver, CO 80202

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9522

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Joe Kinn

☐ Agent

☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

17 JUL

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

If YES, enter delivery address below: ☒ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harry + Sharon Lane Living Trust
 Sharon M. Lane, Trustee
 P.O. Box 243
 Farmington, NM 87499-0243

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9546

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Harry Lane*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Harry Lane

C. Date of Delivery

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

7002 2410 0001 0133 9546
 JUL 12 2003
 87401

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William M. Lansdale
 P.O. Box 27
 Seal Beach, CA 90740

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9553

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Cirilo Hernandez*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Cirilo Hernandez

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Charles Longcope, Jr.
 7157 Gipe Way
 Dallas, TX 75225

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9577

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Charles Longcope, Jr.*
☐ Agent
☒ Addressee

B. Received by (Printed Name)

Charles Longcope, Jr.

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Ed Longcope
400 W. Hopkins St., Suite 101
San Marcos, TX 78666-4462

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9584

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Kay Longcope
1312 Travis Heights Blvd.
Austin, TX 78704

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9591

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Howe Leggett Partners, AP
P.O. Box 4887
Dept. 4
Houston, TX 77210-4887

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9607

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James M. + Blanche D. Martin
943 T Avenue
Rural Route 1 Box 321
Conneil Grove, KS 66846-8777

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9621

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Blanche Martin ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-14-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MetBride Oil + Gas Corp.
P.O. Box 1515
Roswell, NM 88202-1515

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9638

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jan Starnes ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-14-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Frank J. MetBride Trust #1
c/o Sunflower Bank
P.O. Box 800
Salina, KS 67401-0800

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9645

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Matthew Ehrlich ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-14-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John W. McDougall
P.O. Box 267997
Weston, TX 33326

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9652

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Deborah M. McKenna
7555 South Biscay Street
Aurora, CO 80016

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9669

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert M. Miller
5358 South Havana Court
Englewood, CO 80111

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9676

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

JOHN McDUGALL

C. Date of Delivery

7-17-03

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

T.J. McKenna

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Oklahoma Oil Co.
Attn: Wheeler Sears
4925 Greenville Ave., Suite 717
Dallas, TX 75206

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9706

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Maurice + Lorraine Olson
1007 Tarnan Street
Omaha, NE 68102

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9713

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Rosemarie Ottiler
1847 Noel Place
Beverly Hills, CA 90210

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9720

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Ben M. Patterson, Jr.
613 NW Loop 410, Suite 620
San Antonio, TX 78216

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9737

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X B. Fowle

☐ Agent☐ Addressee

B. Received by (Printed Name)

B. Fowle

C. Date of Delivery

7/14/03

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clare M. Phillips
1315 E. Bello Circle
Lockport, IL 60441

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9744

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Clare Phillips

☐ Agent☒ Addressee

B. Received by (Printed Name)

Clare Phillips

C. Date of Delivery

7/15/03

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James Phillips
3400 Bob-O-Link
Denton, TX 76209

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9751

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J. Phillips

☐ Agent☐ Addressee

B. Received by (Printed Name)

J. Phillips

C. Date of Delivery

7-14-03

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Preston Hollow United Meth Church
6315 Walnut Hill Lane
Dallas, TX 75230

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9768

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Craig Ventresca* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Puckett Energy Company
5460 South Quebec St., Suite 250
Greenwood Village, CO 80111-1977

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9775

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *John Puckett* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Resource Enterprises Inc.
345 East 4500 South, Suite 300
Salt Lake City, UT 84107

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9805

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. R. R.* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

R.J. Partnership, Ltd.
755 S Elizabeth
Denver, CO 80209

2. Article Number

PS

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Janet Roark ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Janet L. Roark ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

102595-02-M-10

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:

Melvin Robins
P.O. Drawer 2225
Albuquerque, NM 87102

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9812

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Billie Robinson
P.O. Box 1281
Santa Fe, NM 87501-1281

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 9829

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Billie Robinson ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Billie Robinson ☐ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Kathleen Roman
P.O. Box 1055
Buena Vista, CO 81211

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 7061

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kathleen Roman ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/14/03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James + Nicholas Rubaw
200 S. Main Street
Cortez, NM 87410

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 7078

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Nicholas Rubaw ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

NICHOLA RUBAW 7-11-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

San Juan Basin Properties, LLC
1499 Blake Street #7K
Denver, CO 80202

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 7085

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

San Juan Basin Properties, LLC ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/12/03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Dillon Sapp 1993 Trust
Chase Bank of Texas, Trustee
P.O. Box 201984
Houston, TX 77216-1884

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 7108

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Margaret Sapp 1993 Trust
Chase Bank of Texas, Trustee
P.O. Box 201884
Houston, TX 77216-1884

2. Article Number

(Transfer from service label)

7002 2410 0001 0133 6828

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William Dean Sapp 1993 Trust
Chase Bank of Texas, Trustee
P.O. Box 201884
Houston, TX 77216-1884

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0092

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sealy + Company, LP
P.O. Box 9557
Fort Worth, TX 76147

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0108

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

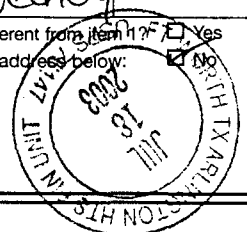
X Sarah Sweeney

☐ Agent☐ Addressee

B. Received by (Printed Name)

Sarah Sweeney

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SECO Energy Corp.
1801 Broadway, Suite 900
Denver, CO 80202

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0115

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Heuser

☐ Agent☐ Addressee

B. Received by (Printed Name)

JUL 16 2003

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Susan C. Sheridan
151 South Birch Street
Denver, CO 80246-1016

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0122

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Krista Sheridan

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

C. S. Slomp Family Trust #1501172
 Lillian Slomp + Chase Bank
 P.O. Box 201884
 Houston, TX 77216-1884

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0139

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Howell + Mary Ann Spear
 DBA Proctor, N. & Son Co.
 Ward To:
 Box 1684
 and, Texas 79702

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0146

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

L. SPEAR

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Viola L. Stewart
 P.O. Box 291245
 Kernville, TX 78029-1245

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0153

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Evelyn Graham

7/14/03

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

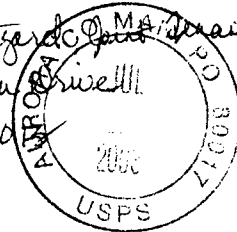
☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David + Jennie Steyerdc Post Office
19456 E. Nassau Street
Durand, CO 80027



2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0160

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Violet Graves Stubbeman
c/o David Stubbeman
P.O. Box 3473
Abilene, TX 79604

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0177

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Lisa Sweeney
152 Mary Lynn Lane
Newman, GA 30265

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0184

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Stella Sernas
1275 Sierra Ridge
New Lenox, IL 60451

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0207

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-14-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Texas Commerce Bank, Trustee
Acct 5067200
P.O. Box 209871
Houston, TX 77216-9871

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0214

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosita Trujillo
P.O. Box 1225
Cheyenne, WY 82003

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0221

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 14 2003

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dorothy J. Tucker Trust
200 Cascade Ave.
Cheyenne, WY 82009

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0238

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

[Signature] ☒ Date of Delivery
JUL 12 2003

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George Volis
519 Glen Arbor
Bessemer, Md 47236

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0245

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

[Signature] ☒ Date of Delivery
7-14-03

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Westway Petro
500 N. Akard, Suite 200
Dallas, TX 75201

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0252

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

JUL 9 2003 ☒ Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William K. Wieland
7831 Academy Trail NE
Albuquerque, NM 87109



2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0269

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Janet Wieland
B. Received by (Printed Name)
Janet Wieland

☐ Agent
☐ Addressee

C. Date of Delivery

7/14/03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jack B. Wilkinson, Jr.
P.O. Box 305
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jack Wilkinson
B. Received by (Printed Name)
Jack Wilkinson

☐ Agent
☐ Addressee

C. Date of Delivery

7-15-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0276

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

J. L. Williams
B. Received by (Printed Name)
J. L. Williams

☐ Agent
☐ Addressee

C. Date of Delivery

7-12-03

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0283

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

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:

Martha K. Williamson
4949 Skillman #155
Dallas, TX 75206

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0290

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/16/03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Buy M. Willis
P.O. Box 823447
Dallas, TX 75382

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0306

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/22/03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lattie Leek Wood
P.O. Box 1099
Rising Star, TX 76471

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0313

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-14-03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Yellow Ribbon Inc.
P.O. Box 6901
Denver, CO 80206

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0320

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William T. Gault*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

GAETHI

C. Date of Delivery

07/11/01

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Zimmerman
c/o Advantage Trust Company
P.O. Box 1337
Salina, KS 67402-1337

2. Article Number

(Transfer from service label)

7002 2410 0001 0134 0337

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Matthew Seider*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

MATTHEW SEIDER

C. Date of Delivery

7-14-03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes