7011 3500 0002 4935 9519

U.S. Postal Service™
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CARLSBAD NM 88220 OFFICIAL USE

Postage	$ $0.66
Certified Fee	$3.10
Return Receipt Fee (Endorsement Required)	$2.55
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$ $6.31

0702 02 Postmark Here — 06/19/2013

Sent To: Danny Granger
Street, Apt. No.; or PO Box No.: 305 Vela St
City, State, ZIP+4: Carlsbad, NM 88220

PS Form 3800, August 2006 — See Reverse for Instructions

7011 3500 0002 4935 9526

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HILO HI 96720 OFFICIAL USE

Postage	$ $0.66
Certified Fee	$3.10
Return Receipt Fee (Endorsement Required)	$2.55
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$ $6.31

0702 02 Postmark Here — 06/19/2013

Sent To: Stewart Hall Rev Living Trust
Street, Apt. No.; or PO Box No.: 798 Nou St
City, State, ZIP+4: Hilo, HI 96720

PS Form 3800, August 2006 — See Reverse for Instructions

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:

Stewart Hall Rev Living Trust
798 Nou St
Hilo, HI 96720

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Address

B. Received by (Printed Name) [signature] C. Date of Delivery 6/21/13

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) 7011 3500 0002 4935 9526

7011 3500 0002 4935 9656

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GRAND PRAIRIE TX 75052 OFFICIAL USE

Postage	$0.66
Certified Fee	$3.10
Return Receipt Fee (Endorsement Required)	$2.55
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$6.31

0702 02 Postmark Here JUN 19 2013 GRAND PRAIRIE TX COUNTOWN STA

06/19/2013

Sent To: H.G. Hampton
Street, Apt. No., or PO Box No.: 4966 Briar Oak Land
City, State, ZIP+4: Grand Prairie, TX 75052

PS Form 3800, August 2006 — See Reverse for Instructions

7011 3500 0002 4935 9663

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CARLSBAD NM 88220 OFFICIAL USE

Postage	$0.66
Certified Fee	$3.10
Return Receipt Fee (Endorsement Required)	$2.55
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$6.31

0702 02 Postmark Here JUN 19 2013 CARLSBAD NM

Sent To: Debra Harris
Street, Apt. No., or PO Box No.: P.O. Box 1485
City, State, ZIP+4: Carlsbad, NM 88200

PS Form 3800, August 2006 — See Reverse for Instructions

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:

H.G. Hampton
4966 Briar Oak Land
Grand Prairie, TX 75052

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) S Hampton C. Date of Delivery 6-26-13

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) 7011 3500 0002 4935 9656

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Debra Harris
P.O. Box 1485
Carlsbad, NM 88200

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature]

B. Received by (Printed Name) Nancy L. Galloway C. Date 06-

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

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

4. Restricted Delivery? (Extra Fee) ☐

2. Article Number (Transfer from service label) 7011 3500 0002 4935 9663

PS Form 3811, February 2004 Domestic Return Receipt 1025

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

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

MALAGA NM 88263 OFFICIAL USE

Postage	$ $0.66	0702
Certified Fee	$3.10	02
Return Receipt Fee (Endorsement Required)	$2.55	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	JUN 19 2013
Total Postage & Fees	$ $6.31	06/19/2013

Sent To: Francis Harris
Street, Apt. No.; or PO Box No.: P.O. Box 89
City, State, ZIP+4: Malaga, NM 88263

PS Form 3800, August 2006 See Reverse for Instructions

7011 3500 0002 4935 9670

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

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

TULSA OK 74135 OFFICIAL USE

Postage	$ $0.66	0702
Certified Fee	$3.10	02
Return Receipt Fee (Endorsement Required)	$2.55	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $6.31	06/19/2013

Sent To: Dorothy Harroun Trust
c/o Farmers Natl Bank
Street, Apt. No.; or PO Box No.: 5110 S. Yale, Ste 400
City, State, ZIP+4: Tulsa, OK 74135

PS Form 3800, August 2006 See Reverse for Instructions

7011 3500 0002 4935 9250

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:

Francis Harris
P.O. Box 89
Malaga, NM 88263

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Dean Harris ☐ Agent ☐ Addressee

B. Received by (Printed Name): Dean Harris C. Date of Delivery: 6-22-13

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): 7011 3500 0002 4935 9670

PS Form 3811, February 2004

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 Harroun Trust
c/o Farmers Natl Bank
5110 S. Yale, Ste 400
Tulsa, OK 74135

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X

B. Received by (Printed Name): C. Dat

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

USPS JUN 21 2013 TULSA OK SHERIDAN STA

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

4. Restricted Delivery? (Extra Fee)

2. Article Number (Transfer from service label): 7011 3500 0002 4935 9250

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

OFFICIAL USE

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

Postmark Here

Sent To: Alfredo Hernandez
Street, Apt. No.; or PO Box No.: 1111 Normandy St.
City, State, ZIP+4: Carlsbad, NM 88220

PS Form 3800, August 2006 — See Reverse for Instructions

7010 0290 0003 4461 2638

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

RSC Resources, LP
6824 Island Circle
Midland, TX 79707

7010 0290 0003 4461 2638

UNITED STATES POSTAL SERVICE

1000

88220

U.S. POSTAGE
PAID
MIDLAND, TX
79701
APR 29, 13
AMOUNT
$6.31
00055732-07

RETURN TO SENDER

REFUSED BY ADDRESSEE

Alfredo Hernandez
1111 Normandy St.
Carlsbad, NM 88220

88220$4324

Declined