

CASE NO. 21896

**APPLICATION OF MEWBOURNE OIL COMPANY FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO**

MEWBOURNE OIL COMPANY'S EXHIBIT LIST

- PART II

1. Application and Proposed Notice
2. Landman's Affidavit
3. Geologist's Affidavit
4. Certified Mail Notice Affidavit
5. Affidavits of Publication
6. Pooling Checklist

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

**APPLICATION OF MEWBOURNE OIL COMPANY
FOR COMPULSORY POOLING, EDDY COUNTY,
NEW MEXICO.**

Case Nos. 21896

SELF-AFFIRMED STATEMENT

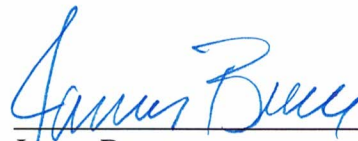
COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Mewbourne Oil Company.
3. Notice of the pooling application was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letters and certified return receipts are attached hereto as Attachment A.
4. Applicant has complied with the notice provisions of Division Rules.
5. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 4 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: _____

9/21/21



James Bruce

EXHIBIT

4

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

June 24, 2021

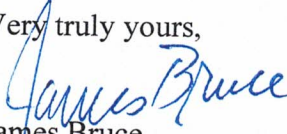
CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application (Case No. 21896), filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, seeking an order the pooling all mineral interest owners in the Wolfcamp formation underlying a horizontal spacing unit comprised of the W/2 of Section 28, Township 23 South, Range 28 East, NMPM. This matter is scheduled for hearing at 8:15 a.m. on Thursday, July 15, 2021. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnrd.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnrd.state.nm.us/OCD/announcements.html>. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, July 8, 2021. This statement may be filed online with the Division at ocd.hearings@state.nm.us, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company

ATTACHMENT

A

EXHIBIT

A

Antonio Ramirez
P.O. Box 512
Loving, New Mexico 88256

Ashton Pollock
9 Elk Path
Manitou Springs, Colorado 80829

Belinda Sue Williams
13260 W. 42nd Street
Odessa, Texas 79764

Bonnie Pollock
269 Dyea Avenue, Apt. B
Jber, Alaska 99505

Carmen Echavarria and
Ricardo Echavarria
P.O. Box 254
Loving, New Mexico 88256

Diane Duran
114 Morgan Lane
Swansea, Illinois 62226

Don C. Spearman
510 W. Richey Avenue
Artesia, New Mexico 88210

Doris S. Williams, Trustee
of the Williams Living Trust
1323 Willow Lane
Farmersville, Texas 75442

Duston Spearman
46 Mesquite Lane
Artesia, New Mexico 88210

EXHIBIT

A

Enedina R. Ruiz
2621 Patrick Street
Carlsbad, New Mexico 88220

Eva Melba McGinnis
415 S. 5th Street
Loving, New Mexico 88256

Francisca L. Hernandez
P.O. Box 54
Loving, New Mexico 88256

Francisco J. Hernandez
P.O. Box 50
Loving, New Mexico 88256

Gerard J. Hernandez
435 Ithaca Court, Apt. D-6
Las Cruces, New Mexico 88011

Gloria Duran
P.O. Box 502
Loving, New Mexico 88256

Goethe Minerals LLC
1933 San Mateo Blvd. NE
Albuquerque, New Mexico 87110

Guadalupe R. Melendrez
705 Irvin Street
Carlsbad, New Mexico 88220

Haley Pollock
2224 Collins Avenue
Carlsbad, New Mexico 88220

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 88201

Hipolito Hernandez and
wife Ofelia Hernandez
P.O. Box 1374
Loving, New Mexico 88256

Jaime Y. Quinonez and
wife Theresa A. Quinonez
P.O. Box 63
Loving, New Mexico 88256

EXHIBIT

A

James Clay Williams
743 North Oak Street
Kermit, Texas 79745

James W. Williams
7985 Highway 38
Mountain Grove, Missouri 65711

John D. Stribling
520 Ranchitos Road
Albuquerque, New Mexico 87114

Karin Lanette Williams
P.O. Box 639
Loving, New Mexico 88256

Lanora Sue Williams Allomong
14-6444 C.R. 8
Montpelier, Ohio 43543

Lenore Armendariz
1039 Pinon Lane
Carlsbad, New Mexico 88220

Linda Sue Williams Harris
33764 LA Highway 16
Denham Springs, Louisiana 70706

Linville D. Williams
1345 N. Greenfield Road
Gilbert, Arizona 85234

Lovella Kilman
8425 James Avenue NE
Albuquerque, New Mexico 87111

Lucila Ramirez
120 Pear Street
Roswell, New Mexico 88201

Manuel Leyva and
wife Cynthia Leyva Parraz
P.O. Box 1374
Loving, New Mexico 88256

Martha Joy Stribling
918 Parkland Circle SE
Albuquerque, New Mexico 87108

EXHIBIT

A

Martha M. Stribling
520 Ranchitos Road
Albuquerque, New Mexico 87144

Mary Ann Murillo Dearing
P.O. Box 263
Loving, New Mexico 88256

Mary Katholeen Pollock Moore
1465 Eaglenest Drive
Azle, Texas 76020

Mike Armendariz, Jr.
4207 Olympus
Bremerton, Washington 98310

O.L. Robinson and
wife Doreitha Robinson
407 3rd Street
Loving, New Mexico 88256

Poetwork LLC
75 Circle Drive NE
Albuquerque, New Mexico 87122

Rafael M. Madrid
P.O. Box 13
Loving, New Mexico 88256

Randy Jo Lassiter
702 Amberjack Way
Lebanon, Tennessee 37087

Reuben Galvan
2544 Snow Road
Las Cruces, New Mexico 88005

Rickey Ray Lassiter
P.O. Box 607
Loving, New Mexico 88256

Robert Duncan Cain, Jr.
1933 San Mateo Blvd. NE
Albuquerque, New Mexico 87110

Salem Pecos Stribling
7319 Via Contenta NE
Albuquerque, New Mexico 87113

EXHIBIT

A

Scone, LLC
5670 Iris NE
Rio Rancho, New Mexico 87114

Shirley Lee Tarleton
15 Farmers Way
Datil, New Mexico 87821

Sondra Lynn Ellyson
536 Rose Branch Drive
La Vernia, Texas 78121

Sonya Leigh Barron
207 Dodds Creek Drive
Gatesville, Texas 76528

Stanley Dean Williams
P.O. Box 634
Loving, New Mexico 88256

Stephanie Kay Fate-Dixon and Victoria
Anne Fate Gorrell, Personal Representatives
of the Estate of Margaret L. Fate
615 Windmill Ranch Road
Encinitas, California 92024

Steven Nyle Williams
100 Rushy Creek Circle
Red Oak, Texas 75154

Teresa Juarez
P.O. Box 10
Eunice, New Mexico 88231

Terry Hill f/k/a Terry L. Calk
P.O. Box 275
Loving, New Mexico 88256

Terry Lee Williams
13260 W. 42nd Street
Odessa, Texas 79764

Heirs or devisees of Victor Echavarria
and wife Concepcion Echavarria
3002 Ocotillo Canyon Drive
Carlsbad, New Mexico 88220

5.

EXHIBIT

A

Heirs or devisees of Ersal E. Hepler, who
apparently are: Rachel Hepler and the heirs
or devisees of Nancy Hepler Curtiss; and the
devisee of Gary Hepler, who apparently is
Rachel Hepler

7408 Autumn Sky Road SW
Albuquerque, New Mexico 87121

The heirs or devisees of Ignacio M. Olivo
P.O. Box 572
Loving, New Mexico 88256

Heirs or devisees of Jackye Earle White,
who apparently are the heirs or devisees
of James Earl Turner
1411 E. 12th Street
Sweetwater, Texas 79556

Heirs or devisees of Kenneth Authur Hepler
and Norma Jean Harvey Hepler, who apparently
is Sharon Hepler Patterson
604 N. 5th Street, Apt. 57
Carlsbad, New Mexico 88220

Trine S. Rodriguez and
wife Carolina Rodriguez
P.O. Box 373
Loving, New Mexico 88256

Vincent M. Milavec, Michael Schaefer and
Paulette V. Misanko, Co-Trustees of the Joe
T. Milavec and Cella B. Milavec Revocable
Trust
P.O. Box 22
Paralta, New Mexico 87042

Donald R. Lammerman
5300 E. Cherry Creek South Drive
Apartment 1128
Denver, Colorado 80246

CONFIRMATION

JAMES BRUCE ATTORNEY
POBOX 1056
SANTA FE NM 87504-

PO#:

<u>Account</u>	<u>AD#</u>	<u>Ordered By</u>	<u>Tax Amount</u>	<u>Total Amount</u>	<u>Payment Method</u>	<u>Payment Amount</u>	<u>Amount Due</u>
1419282	0004723093	Jim Bruce	\$18.49	\$260.29	Invoice	\$0.00	\$260.29

Ad Order Notes:

Sales Rep: ammarsh

Order Taker: ammarsh

Order Created 05/05/2021

<u>Product</u>	<u>Placement</u>	<u>Class</u>	<u># Ins</u>	<u>Start Date</u>	<u>End Date</u>
ELP-CA Current-Argus	ELP-Legals	Legal Notices	1	05/06/2021	05/06/2021
ELP-currentargus.com	ELPW-Legals	Legal Notices	1	05/06/2021	05/06/2021

Text of Ad: 05/05/2021

NOTICE

To: Antonio Ramirez; Ashton Pollock; Belinda Sue Williams; Bonnie Pollock; Carmen Echavarria and Ricardo Echavarria; Diane Duran; Don C. Spearman; Doris S. Williams, Trustee of the Williams Living Trust dated March 18, 2008; Duston Spearman; Enedina R. Ruiz; Eva Melba McGinnis; Francisca L. Hernandez; Francisco J. Hernandez; Gerard J. Hernandez; Gloria Duran; Goethe Minerals LLC; Guadalupe R. Melendrez; Haley Pollock; Harry R. Young; Hipolito Hernandez and wife Ofelia Hernandez; Jaime Y. Quinonez and wife Theresa A. Quinonez; James Clay Williams James W. Williams; John D. Stribling; Karin Lanette Williams; Lanora Sue Williams Allomong; Lenore Armendariz; Linda Sue Williams Harris; Linville D. Williams; Lovella Kilman; Lucila Ramirez; Manuel Leyva and wife Cynthia Leyva Parraz; Martha Joy Stribling; Martha M. Stribling; Mary Ann Murillo Dearing; Mary Katholeen Pollock Moore; Mike Armendariz, Jr.; O.L. Robinson and wife Doreitha Robinson; Poetwork LLC; Rafael M. Madrid; Randy Jo Lassiter; Reuben Galvan; Rickey Ray Lassiter; Robert Duncan Cain, Jr.; Salem Pecos Stribling; Scone, LLC ; Shirley Lee Tarleton; Sondra Lynn Ellyson; Sonya Leigh Barron; Stanley Dean Williams; Stephanie Kay Fate-Dixon and Victoria Anne Fate Gorrell, Personal Representatives of the Estate of Margaret L. Fate; Steven Nyle Williams; Teresa Juarez; Terry Hill fka Terry L. Calk; Terry Lee Williams; the heirs and devisees of Victor Echavarria; the heirs and devisees of Victor Echavarria and wife Concepcion Echavarria; the heirs or devisees of Ersal E. Hepler, who apparently are: Rachel Hepler, and the heirs or devisees of Nancy Hepler Curtiss and the devisee of Gary Hepler, who apparently is Rachel Hepler; the heirs or devisees of Ignacio M. Olivo; the heirs or devisees of Jackye Earle White, who apparently are the heirs or devisees of James Earl Turner; the heirs or devisees of Kenneth Authur Hepler and Norma Jean Harvey Hepler, who apparently is Sharon Hepler Patterson; Trine S. Rodriguez and wife Carolina Rodriguez; Vincent M. Milavec, Michael Schaefer and Paulette V. Misanko, Co-Trustees of the Joe T. Milavec and Cella B. Milavec Revocable Trust dated July 15, 1994 as amended June 4, 2009; and Donald R. Lammerman, or your heirs, devisees, successors, or assigns: Mewbourne Oil Company has filed an application with the New Mexico Oil Conservation Division (Case No. 21896) seeking an order pooling all mineral interests in the Wolfcamp formation underlying a horizontal spacing unit comprised of the W/2 of Section 28, Township 23 South, Range 28 East, NMPM, Eddy County, New Mexico. The unit will be dedicated to the following wells: (a) the Thor 28 WXY Fee Well No. 1H, with a first take point in the SE/4SW/4, and a last take point in the NE/4NW/4; of Section 28; (b) the Thor 28 WA Fee Well No. 3H, with a first take point in the SE/4SW/4, and a last take point in the NE/4NW/4; of Section 28; (c) the Thor 28 WXY Fee Well No. 5H, with a first take point in the SW/4SW/4, and a last take point in the NW/4NW/4; of Section 28; and (d) The Thor 28 WD Fee Well No. 8H, with a first take point in the SW/4SW/4, and a last take point in the NW/4NW/4 of Section 28. Also to be considered will be the cost of drilling, completing, and equipping the wells and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the wells, and a 200% charge for the risk involved in drilling, completing, and equipping the wells. This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 20, 2021. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnrd.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnrd.state.nm.us/OCD/announcements.html>. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504. The unit is located approximately 1/2 mile south of Loving, New Mexico. #4723093, Current Argus, May 6, 2021

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT		Official USE
<i>Domestic Mail Only</i>		
For delivery information, visit our website at www.usps.com ®.		
Certified Mail Fee	\$ _____	Postmark Here
Extra Services & Fees (<i>check box, add fee as appropriate</i>)		
☐ Return Receipt (hardcopy)	\$ _____	
☐ Return Receipt (electronic)	\$ _____	
☐ Certified Mail Restricted Delivery	\$ _____	
☐ Adult Signature Required	\$ _____	
☐ Adult Signature Restricted Delivery	\$ _____	
Postage	\$ _____	
Total Postage and Fees	\$ _____	
Sent To	\$ _____	
Street and Apt. No., or PO Box No.		
City, State, ZIP+4®		

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee \$	Extra Services & Fees (check box, add fee as appropriate) ☐ Return Receipt (hardcopy) \$ ☐ Return Receipt (electronic) \$ ☐ Certified Mail Restricted Delivery \$ ☐ Adult Signature Required \$ ☐ Adult Signature Restricted Delivery \$ Postage \$
Total Postage and Fees \$	Sent To _____ Street and Apt. No., or PO Box _____ City, State, ZIP+4® _____
PS Form 3800, April 2015 PSN 7530-02-000-9047	
See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. ■ 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: Trine S. Rodriguez and wife, Carolina Rodriguez P.O. Box 373 Loving, New Mexico 88256	A. Signature ☒ Agent ☐ Addressee Kenny Rodriguez B. Received by (Printed Name) Date of Delivery Kenny Rodriguez 7/8/24 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article  9590 9402 6769 1074 4390 68	3. Service Type ☐ Adult Signature ☒ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

U.S. Postal Service CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

Total Postage and Fees

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark
HereRandy Jo Lassiter
702 Amberjack Way
Lebanon, Tennessee 37087

7202 0640 0000 1388 1837

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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.

Article Addressed to:

Rickey Ray Lassiter
P.O. Box 607
Loving, New Mexico 88256

9590 9402 5712 9346 7875 22

2. Article

7020 0640 0000 1388 1851

☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

Total Postage and Fees

Sent To

Rickey Ray Lassiter
P.O. Box 607
Loving, New Mexico 88256

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

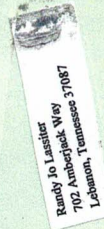
Postmark
Here

7202 0640 0000 1388 1837

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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.

Article Addressed to:

Randy Jo Lassiter
702 Amberjack Way
Lebanon, Tennessee 37087

9590 9402 5712 9346 7879 42

2. Article

7020 0640 0000 1388 1837

☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Randy Jo Lassiter* Agent

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ 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:

Mike Amendarez, Jr.
 4207 Olympus
 Bremerton, Washington 98310

9590 9402 5712 9346 7879 04

2. Article Number **7020 0640 0000 1388 1790**
☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) Miguel Amendarez C. Date of Delivery 7/7/21

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$

Sent To Mike Amendarez, Jr.
4207 Olympus
Bremerton, Washington 98310

Street and Apt. No., or PO Box No. 4207 Olympus
 City, State, ZIP+4® Bremerton, Washington 98310

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ 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:

Heirs or devisees of Victor Echavarria
 and wife Concepcion Echavarria
 3002 Ocotillo Canyon Drive
 Carlsbad, New Mexico 88220

9590 9402 5712 9346 7882 08

2. Article Number **7020 0640 0000 1388 1752**
☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) Miguel Amendarez C. Date of Delivery 7/7/21

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Sent To Heirs or devisees of Victor Echavarria
3002 Ocotillo Canyon Drive
Carlsbad, New Mexico 88220

Street and Apt. No., or PO Box No. 3002 Ocotillo Canyon Drive
 City, State, ZIP+4® Carlsbad, New Mexico 88220

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7061 88ET 0000 0790 0202

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

OFFICIAL USE

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Linda Sue Williams Harris

C. Date of Delivery 7/20/20

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Article Addressed to:

Postmark Here

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To John D. Scribbling

Street and Apt. No., or PO Box No. 520 Ranchitos Road

City, State, ZIP+4® Albuquerque, New Mexico 87114

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2. Article 7020 0640 0000 1388 1943 Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Linda Sue Williams Harris

C. Date of Delivery 7/20/21

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Article Addressed to:

Postmark Here

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To John D. Scribbling

Street and Apt. No., or PO Box No. 520 Ranchitos Road

City, State, ZIP+4® Albuquerque, New Mexico 87114

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2. Article 7020 0640 0000 1388 1905 Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

7061 88ET 0000 0790 0202

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COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Linda Sue Williams Harris

C. Date of Delivery 7/20/21

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Article Addressed to:

Postmark Here

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To John D. Scribbling

Street and Apt. No., or PO Box No. 520 Ranchitos Road

City, State, ZIP+4® Albuquerque, New Mexico 87114

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2. Article 7020 0640 0000 1388 1905 Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

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Postmark
Here

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Jaime Y. Quinonez and wife Theresa A. Quinonez
P.O. Box 63
Loving, New Mexico 88256

Street and Apt. No., or PO Box No. _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2112 88ET 0000 0490 0202

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
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.

Article Addressed to:

1. Article Addressed to:

2. Article Addressed to:

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

2. Art 7020 0640 0000 1388 2025 (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Released to Imaging: 9/22/2021 8:44:31 AM

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Postmark
Here

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Jaime Y. Quinonez and wife Theresa A. Quinonez
P.O. Box 63
Loving, New Mexico 88256

Street and Apt. No., or PO Box No. _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

5202 88ET 0000 0490 0202

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Mary Kathleen Pollock Moore
1465 Eaglemont Drive
Azle, Texas 76020

Street and Apt. No., or PO Box No. N.

City, State, ZIP+4® 76020

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

E921 88ET 0000 0490 0202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Complete items 1, 2, and 3.

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.

Article Addressed to:

Carmen Echarvarria and
Ricardo Echarvarria
P.O. Box 254
Loving, New Mexico 88256

9590 9402 6769 1074 4392 80

2. Article 7020 0640 0000 1388 2162 (over \$500)

Domestic Return Receipt M7

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Carmen Echarvarria C. Date of Delivery 7/16/21

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Carmen Echarvarria and
Ricardo Echarvarria
P.O. Box 254
Loving, New Mexico 88256

Street and Apt. No., or PO Box No. 254

City, State, ZIP+4® 88256

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2912 88ET 0000 0490 0202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Complete items 1, 2, and 3.

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.

Article Addressed to:

Mary Kathleen Pollock Moore
1465 Eaglemont Drive
Azle, Texas 76020

9590 9402 5712 9346 7878 98

2. Article 7020 0640 0000 1388 1783 (over \$500)

Domestic Return Receipt M7

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) M. Moore C. Date of Delivery 7-1-21

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Sonya Leigh Barron
207 Dadds Creek Drive
Gatesville, Texas 76528

Street and Apt. No., or PO Box No.

City, State, Zip+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0222 888 1388 0000 0490 0202

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee

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

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

7-1

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Restricted Delivery

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

1. Article Addressed to:

Complete items 1, 2, and 3.

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.

Article Addressed to:

Steven Nyle Williams
100 Ruby Creek Circle
Red Oak, Texas 75154

9590 9402 5712 9346 7878 50

7020 0640 0000 1388 3251

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Steven Nyle Williams
100 Ruby Creek Circle
Red Oak, Texas 75154

Street and Apt. No., or PO Box

City, State, Zip+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1522 888 1388 0000 0490 0202

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee

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

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

7-1-21

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Restricted Delivery

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

1. Article Addressed to:

Complete items 1, 2, and 3.

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.

Article Addressed to:

Sonya Leigh Barron
207 Dadds Creek Drive
Gatesville, Texas 76528

9590 9402 5712 9346 7878 29

7020 0640 0000 1388 3220

PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
■ 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:

Linville D. Williams
1345 N. Greenfield Road
Gilbert, Arizona 85234

2. Article Number *Transferring* 7020 0640 0000 1388 1950 (over \$500) *MT*

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Linville D. Williams* ☐ Agent ☐ Addressee ☒ Date of Delivery

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

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Signature Confirmation™
☐ Collect on Delivery
☐ Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

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Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent To *Linville D. Williams
1345 N. Greenfield Road
Gilbert, Arizona 85234*

Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
■ 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:

Linville D. Williams
1345 N. Greenfield Road
Gilbert, Arizona 85234

2. Article Number *Transferring* 7020 0640 0000 1388 1929 (over \$500) *MT*

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Linville D. Williams* ☐ Agent ☐ Addressee ☒ Date of Delivery

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

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Signature Confirmation™
☐ Collect on Delivery
☐ Restricted Delivery

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Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent To *Linville D. Williams
1345 N. Greenfield Road
Gilbert, Arizona 85234*

Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 0640 0000 1388 1929

056T 88ET 0000 0490 0202

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
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.

Article Addressed to:

Gloria Duran
P.O. Box 502
Loving, New Mexico 88256

9590 9402 6769 1074 4391 74

7020 0640 0000 1388 2056

2. Article Number (Transfer from carrier label)

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION

A. Signature Gloria Duran ☐ Agent ☒ Addressee

B. Received by (Printed Name) Gloria Duran C. Date of Delivery 7/2/2021

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery

Domestic Return Receipt

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Gloria Duran
P.O. Box 502
Loving, New Mexico 88256

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$ _____
Extra Services & Fees (<i>check box, add fee as appropriate</i>)	
☐ Return Receipt (hardcopy)	\$ _____
☐ Return Receipt (electronic)	\$ _____
☐ Certified Mail Restricted Delivery	\$ _____
☐ Adult Signature Required	\$ _____
☐ Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____
Sent To	\$ _____
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	
Doris S. Williams, Trustee of the Williams Living Trust 1323 Willow Lane Farmerville, Texas 75442	
Postmark Here	
See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.

■ 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:

Doris S. Williams, Trustee
 of the Williams Living Trust
 1323 Willow Lane
 Beaumontville, Texas 75442

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

2. Article Addressed to:

7020 0640 0000 1388 2193

PS Form 3811, July 2020 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. ■ 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: k 24 Avenue New Mexico 88220	COMPLETE THIS SECTION ON DELIVERY A. Signature ☐ Agent <i>[Signature]</i> ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article  9590 9402 6769 1074 4392 04 7020 0640 0000 1388	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Restricted Delivery ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		For delivery information, visit our website at www.usps.com® .	
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Certified Mail Fee \$ _____		Extra Services & Fees (check box, add fee as appropriate)	
		☐ Return Receipt (hardcopy) \$ _____	
		☐ Return Receipt (electronic) \$ _____	
		☐ Certified Mail Restricted Delivery \$ _____	
		☐ Adult Signature Required \$ _____	
		☐ Adult Signature Restricted Delivery \$ _____	
		Postage \$ _____	
		Total Postage and Fees \$ _____	
Sent To _____		Haley Pollock 2224 Collins Avenue Carlsbad, New Mexico 88220	
Street and Apt. No., or PO Box No. _____			
City, State, Zip+4® _____			

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
Total Postage and Fees \$
 Sent To Reuben Galvan
2544 Snow Road
Las Cruces, New Mexico 88005
 Street and Apt. No., or PO Box
 City, State, Zip+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 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. Signature Shiela Wilson ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Shiela Wilson C. Date of Delivery 11-6-21
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery

2. Article Number (Transfer from service label)
7020 0640 0000 1388 1844 (over \$500)
 PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
Total Postage and Fees \$
 Sent To James W. Williams
7985 Highway 38
Mountain Grove, Missouri 65711
 Street and Apt. No., or PO Box No.
 City, State, Zip+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 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. Signature Reuben Galvan ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Reuben Galvan C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

2. Article Number (Transfer from service label)
7020 0640 0000 1388 1844 (over \$500)
 PS Form 3811, July 2015 PSN 7530-02-000-9053

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
Total Postage and Fees \$
 Sent To Reuben Galvan
2544 Snow Road
Las Cruces, New Mexico 88005
 Street and Apt. No., or PO Box
 City, State, Zip+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

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SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.
■ 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.

Don C. Spearman
510 W. Ridgely Avenue
Arlene, New Mexico 88210

2. **7020 0640 0000 1388 2186**

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Jeff Jones C. Date of Delivery 7-1-21

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

3. Service Type

☐ Adult Signature ☐ Registered Mail™
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery

Postage

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Sent To Diene Duran
114 Morgan Lane
Swanton, Illinois 62226

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.
■ 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.

Diene Duran
114 Morgan Lane
Swanton, Illinois 62226

2. **7020 0640 0000 1388 2179**

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Jeff Jones C. Date of Delivery 7-1-21

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

3. Service Type

☐ Adult Signature ☐ Registered Mail™
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery

Postage

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Sent To Diene Duran
114 Morgan Lane
Swanton, Illinois 62226

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$

Sent To Mary Ann Murillo Dearing
P.O. Box 263
Loving, New Mexico 87256
Street and Apt. No., or P.O. Box
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

9227 88ET 0000 0490 0202

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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.
 Article Addressed to:

1. Article Addressed to:
 A. Signature X SA R14019
 B. Received by (Printed Name) B Williams
 C. Date of Delivery 7/1
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

2. Article Number 7020 0640 0000 1388 2148
 (over \$500) ☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$

Sent To Belinda Sue Williams
13260 W. 42nd Street
Odessa, Texas 79764
Street and Apt. No., or P.O. Box
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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.
 Article Addressed to:

1. Article Addressed to:
 A. Signature X SA R14019
 B. Received by (Printed Name) B Williams
 C. Date of Delivery 7/1
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

2. Article Number 7020 0640 0000 1388 2148
 (over \$500) ☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

9227 88ET 0000 0490 0202

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		OFFICIAL USE	
For delivery information, visit our website at www.usps.com ®.		Certified Mail Fee	
\$		\$	Extra Services & Fees (check box, add fee as appropriate)
	☐ Return Receipt (hardcopy)	\$	
	☐ Return Receipt (electronic)	\$	
	☐ Certified Mail Restricted Delivery	\$	
	☐ Adult Signature Required	\$	
	☐ Adult Signature Restricted Delivery	\$	
Postage			
\$		\$	Total Postage and Fees
\$	Sent To	\$	
<i>Street and Apt. No., or PO Box</i>		<i>City, State, ZIP+4®</i>	

Stephanie Kay Fax-Dixon and Victoria
 Anne Faye Correll, Personal Representatives
 of the Estate of Margaret L. Frite
 615 Windmill Ranch Road
 Encinitas, California 92024

Postmark Here

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. ■ 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: Stephanie Kay Fite-Dixon and Victoria Anne Fite Correll, Personal Representatives of the Estate of Margaret L. Fite 615 Windmill Ranch Road Encinitas, California 92024	COMPLETE THIS SECTION ON DELIVERY <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; border-right: 1px solid black; padding: 5px;"> A. Signature ☐ Agent X <i>AF</i> <i>208-19</i> ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>208-19</i> <i>7-2-21</i> </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: </td> </tr> </table>	A. Signature ☐ Agent X <i>AF</i> <i>208-19</i> ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>208-19</i> <i>7-2-21</i>	D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:
A. Signature ☐ Agent X <i>AF</i> <i>208-19</i> ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>208-19</i> <i>7-2-21</i>	D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:		

2. Article 7020 0640 0000 1388 3244	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation Restricted Delivery
--	---

PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt
---	--------------------------------

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
1. Article Addressed to: Marilyn Joy Stirling 918 Highland Circle SE Albuquerque, New Mexico 87108	2. Art PS Form 3811, July 2020 PSN 7530-02-000-9053  9590 9402 6505 0346 1799 72 7020 0640 0000 1388 1998 INSURED MAIL Restricted Delivery (over \$500)
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Restricted Delivery	4. Signature ☒ X COVID-19 5. Received by (Printed Name) COVID-19 6. Is delivery address different from item 1? ☐ Yes ☒ No
7. Complete items 1, 2, and 3. 8. Print your name and address on the reverse so that we can return the card to you. 9. Attach this card to the back of the mailpiece, or on the front if space permits.	10. Agent ☐ Addressee ☒ 11. Date of Delivery 6-29-21 12. Is delivery address different from item 1? ☐ Yes ☒ No

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		For delivery information, visit our website at www.usps.com ®	
		OFFICIAL USE	
Certified Mail Fee		Postmark Here	
\$	Extra Services & Fees (<i>check box, add fee as appropriate</i>)		
	☐ Return Receipt (hardcopy) \$		
	☐ Return Receipt (electronic) \$		
	☐ Certified Mail Restricted Delivery \$		
	☐ Adult Signature Required \$		
	☐ Adult Signature Restricted Delivery \$		
Postage			
\$	Total Postage and Fees		
\$	Sent To	Martha Joy Scribbling 918 Parkland Circle SE Albuquerque, New Mexico 87108	
Street and Apt. No., or PO Box No.			
City, State, ZIP+4®			

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Terry Lee Williams
13260 W. 42nd Street
Odessa, Texas 79764

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

2022 8821 0000 0490 0202

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
■ 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. Signature ☒ Agent ☐ Addressee

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

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

Stanley Dean Williams
P.O. Box 634
Loving, New Mexico 88256

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

any Restricted Delivery

any Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Terry Lee Williams
13260 W. 42nd Street
Odessa, Texas 79764

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
■ 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. Signature ☒ Agent ☐ Addressee

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

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

Terry Lee Williams
13260 W. 42nd Street
Odessa, Texas 79764

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

2022 8821 0000 0490 0202

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Scane, LLC
5670 Iris NE
Rio Rancho, New Mexico 87114

Street and Apt. No., or PO Box No.

City, State, Zip+4® City, State, Zip+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Scane, LLC
5670 Iris NE
Rio Rancho, New Mexico 87114

Street and Apt. No., or PO Box No.

City, State, Zip+4® City, State, Zip+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0612 88ET 0000 0490 0202

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Sandra Lynn Ellyson
536 Rose Branch Drive
La Verne, Texas 78121

Street and Apt. No., or PO Box No.

City, State, Zip+4® City, State, Zip+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Sandra Lynn Ellyson
536 Rose Branch Drive
La Verne, Texas 78121

Street and Apt. No., or PO Box No.

City, State, Zip+4® City, State, Zip+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

ET2E 88ET 0000 0490 0202

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To James Clay Williams
743 North Oak Street
Kermit, Texas 79745

Street and Apt. No., or PO Box No. _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2020 0640 0000 1388 1882

2020 0640 0000 1388 1882

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

2. Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:

Shirley Lee Tarleton
15 Farmers Way
Dahl, New Mexico 87821

9590 9402 5712 9346 7878 05

2. Article Number (Transfer from service label)
7020 0640 0000 1388 3206

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Agent

B. Received by (Printed Name) RECEIVED 7/2/21

C. Date of Delivery

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Shirley Lee Tarleton
15 Farmers Way
Dahl, New Mexico 87821

Street and Apt. No., or PO Box No. _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2020 0640 0000 1388 1882

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

2. Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:

James Clay Williams
743 North Oak Street
Kermit, Texas 79745

9590 9402 6505 0346 1799 89

2. Article Number
7020 0640 0000 1388 1882

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Agent

B. Received by (Printed Name) James Williams

C. Date of Delivery 7/2/21

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

Domestic Return Receipt

2020 0640 0000 1388 1882

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Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$
 Sent To \$
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®
 PS Form 3811, July 2020 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3.
 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.

2. Article Number 7020 0640 0000 1388 1912 (over \$500)
 PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Karin Williams 7/3/21
 C. Date of Delivery 7/3/21
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature
☒ Certified Mail®
☐ Collect on Delivery
☐ Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Postmark Here

Karin Lanette Williams
P.O. Box 639
Loving, New Mexico 88256

9590 9402 6505 0346 1799 41

Gerard J. Hernandez
435 Ithaca Court, Apt. D-6
Las Cruces, New Mexico 88011

PS Form 3800, April 2015 PSN 7530-02-000-9047

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$
 Sent To \$
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9047

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3.
 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.

2. Article Number 7020 0640 0000 1388 2049 (over \$500)
 PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) G. Hernandez 7/2/21
 C. Date of Delivery 7/2/21
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature
☒ Certified Mail®
☐ Collect on Delivery
☐ Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Postmark Here

Gerard J. Hernandez
435 Ithaca Court, Apt. D-6
Las Cruces, New Mexico 88011

9590 9402 6769 1074 4391 67

Gerard J. Hernandez
435 Ithaca Court, Apt. D-6
Las Cruces, New Mexico 88011

PS Form 3800, April 2015 PSN 7530-02-000-9047

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postmark
Here

Vincent M. Milavec, Michael Schaefer and
Paulette V. Misanko, Co-Trustees of the Joe
T. Milavec and Cella B. Milavec Revocable
Trust
P.O. Box 22
Paralia, New Mexico 87042

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

5460 88ET 0000 0490 0202

SENDER: COMPLETE THIS SECTION

A. Signature ☒ Agent ☐ AddresseeB. Received by (Printed Name) Joe T. Milavec C. Date of Delivery 9/11/21D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Article Addressed to:

1. Article Addressed to:

2. Article

3. Service Type

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Certified Mail[®]
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

M

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

9590 9402 6769 1074 4392 11

7020 0640 0000 1388 2094

PS Form 3811, July 2020 PSN 7530-02-000-9053

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postmark
Here

Total Postage and Fees

Sent To

Harry R. Young
2821 N. Elm Avenue
Roswell, New Mexico 8201

Street and Apt. No., or PO Box No.

City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

2. Article

3. Service Type

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Certified Mail[®]
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery
☐ Restricted Delivery
☐ Restricted Delivery (over \$500)

Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

M

Vincent M. Milavec, Michael Schaefer and
Paulette V. Misanko, Co-Trustees of the Joe
T. Milavec and Cella B. Milavec Revocable
Trust
P.O. Box 22
Paralia, New Mexico 87042

9590 9402 6769 1074 4390 51

7020 2450 0002 1362 8945

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Vincent M. Milavec, Michael Schaefer and
Paulette V. Misanko, Co-Trustees of the Joe
T. Milavec and Cella B. Milavec Revocable
Trust
P.O. Box 22
Paralia, New Mexico 87042

9590 9402 6769 1074 4390 51

7020 2450 0002 1362 8945

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

Vincent M. Milavec, Michael Schaefer and
Paulette V. Misanko, Co-Trustees of the Joe
T. Milavec and Cella B. Milavec Revocable
Trust
P.O. Box 22
Paralia, New Mexico 87042

9590 9402 6769 1074 4390 51

7020 2450 0002 1362 8945

PS Form 3811, July 2020 PSN 7530-02-000-9053

4602 88ET 0000 0490 0202

7020 0640 0000 1388 1813

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Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
Total Postage and Fees		
Sent To	Postwork LLC 75 Circle Drive NE Albuquerque, New Mexico 87122	
Street and Apt. No., or PO Box No.		
City, State, ZIP+4®		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 0640 0000 1388 1866

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Certified Mail Fee		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
Total Postage and Fees		
Sent To	Robert Duncan Cain, Jr. 1933 San Mateo Blvd. NE Albuquerque, New Mexico 87110	
Street and Apt. No., or PO Box No.		
City, State, ZIP+4®		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 0640 0000 1388 1936

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Certified Mail Fee		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
Total Postage and Fees		
Sent To	Lenore Armendariz 1039 Pinon Lane Carlsbad, New Mexico 88220	
Street and Apt. No., or PO Box No.		
City, State, ZIP+4®		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 0640 0000 1388 2063

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Certified Mail Fee		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
Total Postage and Fees		
Sent To	Goethe Minerals LLC 1933 San Mateo Blvd. NE Albuquerque, New Mexico 87110	
Street and Apt. No., or PO Box No.		
City, State, ZIP+4®		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 0640 0000 1388 1967

U.S. Postal Service™
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Certified Mail Fee		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
Total Postage and Fees		
Sent To	Lovella Kilman 8425 James Avenue NE Albuquerque, New Mexico 87111	
Street and Apt. No., or PO Box No.		
City, State, ZIP+4®		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

S77081.154

\$6.96⁰
US POSTAGE
FIRST CLASS
06251329232
87501
000129373



Manuel Leyva and
wife Cynthia Leyva Parraz
P.O. Box 1374

0008/03/21

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 87504105656 *0968-01032-28-42

UNC

8625631975

S77077.3

\$6.96⁰
US POSTAGE
FIRST CLASS
06251329232
87501
000129373



Guadalupe R. Melendrez
705 Irvin Street
Carlsbad, New Mexico 88220

0008/03/21

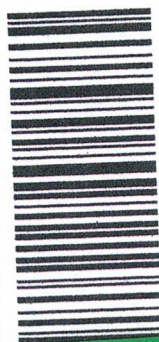
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 87504105656 *2182-00380-03-15

8625631975

STICKER AT TOP OF ENVELOPE TO THE RIGHT
THE RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL®



640 0000 1388 1981

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

Total Postage and Fees

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Manuel Leyva and
wife Cynthia Leyva Parraz
P.O. Box 1374
Loving, New Mexico 88256

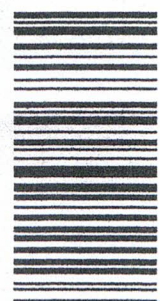
Postmark
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

STICKER AT TOP OF ENVELOPE TO THE RIGHT
THE RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL®



640 0000 1388 2070

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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

Total Postage and Fees

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Guadalupe R. Melendrez
705 Irvin Street
Carlsbad, New Mexico 88220

Postmark
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

S77077.6

\$6.96⁰
US POSTAGE
FIRST-CLASS
062513292392
87501
000129368



Hipolito Hernandez and
wife Ofelia Hernandez

NIXIE

750 DE 1 0008/03/21

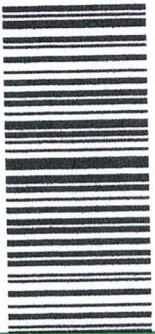
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 87504105656 *0668-01330-28-40

UNC

87504105656

STICKER AT TOP OF ENVELOPE TO THE RIGHT
RETURN ADDRESS: FOLD AT DOTTED LINE
CERTIFIED MAIL®
28 JUN 2021 PM 3 L



640 0000 1388 2100

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Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

\$

Sent To

Hipolito Hernandez and
wife Ofelia Hernandez
P.O. Box 1374
Loving, New Mexico 88256

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark
Here

S77081.159

\$6.96⁰
US POSTAGE
FIRST-CLASS
062513292392
87501
000129368



Heirs or devisees of Kenneth Authur Hepler
and Norma Jean Harvey Hepler, who apparently
is Sharon Hepler Patterson
604 N. 5th Street, Apt. 57

NIXIE

750 DE 1 0008/03/21

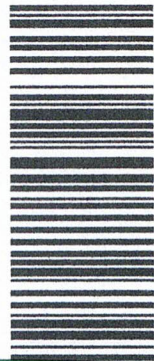
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 87504105656 *0968-01013-28-42

UNC

87504105656

STICKER AT TOP OF ENVELOPE TO THE RIGHT
RETURN ADDRESS: FOLD AT DOTTED LINE
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2450 0002 1362 8969

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Certified Mail Fee

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Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

\$

Sent To

Heirs or devisees of Kenneth Authur Hepler
and Norma Jean Harvey Hepler, who apparently
is Sharon Hepler Patterson
604 N. 5th Street, Apt. 57
Carlsbad, New Mexico 88220

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark
Here

2-1-21

7020 0640 0000 1388 2100

7020 2450 0002 1362 8969

US POSTAGE
FIRST-CLASS
06251329292
87501
000129370



The heirs or devisees of Ignacio M. Olivo
P.O. Box 572

NIXIE 750 DE 1 0008/03/21
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 87504105656 *0968-01015-28-42

UNC
8625830572

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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0 0640 0000 1388 3176

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☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$
Total Postage and Fees

Sent To The heirs or devisees of Ignacio M. Olivo
P.O. Box 572
Loving, New Mexico 88256

Street and Apt. No., or P.O. Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark
Here

S77081.185

US POSTAGE
FIRST-CLASS
06251329292
87501
000129342



Enedina R. Ruiz
2621 Patrick Street
Carlsbad, New Mexico 88220

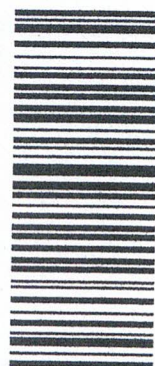
NIXIE 750 FE 1 0008/03/21
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
BC: 87504105656 *0968-01063-28-42

UFE

8625830572

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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0640 0000 1388 2001

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Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$
Total Postage and Fees

Sent To

Enedina R. Ruiz
2621 Patrick Street
Carlsbad, New Mexico 88220

Street and Apt. No., or P.O. Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

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Postmark
Here

\$6.96⁰
US POSTAGE
FIRST CLASS
062513292292
06/13/2021 87501
000123336



Duston Spearman

750 DE 1 0008/05/21

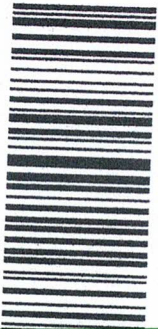
RETURN TO SENDER
IN DISPUTE
UNABLE TO FORWARD

BC: 87504105656 *0968-01061-28-42

87504105656
882103914

STICKER AT TOP OF ENVELOPE TO THE RIGHT
THE RETURN ADDRESS, FOLD AT DOTTED LINE

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\$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$
Total Postage and Fees

Sent To

Duston Spearman
46 Mesquite Lane
Artesia, New Mexico 88210

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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See Reverse for Instructions

Postmark
Here

\$6.96⁰
US POSTAGE
FIRST CLASS
062513292292
06/13/2021 87501
000123336



Francisco J. Hernandez
P.O. Box 50
Loving, New Mexico 88256

STICKER AT TOP OF ENVELOPE TO THE RIGHT
THE RETURN ADDRESS, FOLD AT DOTTED LINE

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640 0000 1388 2032

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☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$
Total Postage and Fees

Sent To

Francisco J. Hernandez
P.O. Box 50
Loving, New Mexico 88256

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark
Here

S77081.156

\$6.96
US POSTAGE
FIRST CLASS
0625132292
87501
000129371



Heirs or devisees of Ersal E. Hepler, who
apparently are: Rachel Hepler and the heirs
or devisees of Nancy Hepler Curtiss; and the
devisee of Gary Hepler, who apparently is

NIXIE 871 DE 1 0007/18/21

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 87504105656 *0968-01016-28-42

UNC
87504105656
871213626

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

Total Postage and Fees

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Heirs or devisees of Ersal E. Hepler, who
apparently are: Rachel Hepler and the heirs
or devisees of Nancy Hepler Curtiss; and the
devisee of Gary Hepler, who apparently is
Rachel Hepler
7408 Autumn Sky Road SW
Albuquerque, New Mexico 87121

PS Form 3800, April 2015 PSN 7530-02-000-9047

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\$6.96
US POSTAGE
FIRST CLASS
0625132292
87501
000129371

1st NOTICE
2nd NOTICE
RETURNED

ALBUQUERQUE NM 870

28 JUN 2021 PM 3 L

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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2450 0002 1362 8938

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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

Total Postage and F

Sent To

Street and Apt. No., or PO Box no.

City, State, ZIP+4®

Donald R. Lammerman
5300 E. Cherry Creek South Drive
Apartment 1128
Denver, Colorado 80246

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Donald R. Lammerman
5300 E. Cherry Creek South Drive

NIXIE 808 DE 1 0007/21/21

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 87504105656

UNC

STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®

640 0000 1388 2155

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here

Postage
\$

Total Postage and Fees
\$

Sent To
Bonnie Pollock
269 Dyea Avenue, Apt. B
Jber, Alaska 99505

Street and Apt. No., or PO Box
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Bonnie Pollock
2269 Dyea Avenue, Apt. B
Iber, Alaska 99505

EXE

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RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

ANK.

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837 694 016 131 692 332 40

* 0958-01058-28-42

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 THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®



640 0000 1388 2131

7/1 (34)

11
 34

U.S. Postal Service™
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Certified Mail Fee

\$ _____

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Postage

\$ _____

Total Postage and Fees

\$ _____

OFFICIAL USE

Postmark
Here

Sent To

Ashton Pollock
 9 Elk Path
 Manitou Springs, Colorado 80829

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Ashton Pollock
9 Elk Path

11
12
13
14
15

87
 66
 63
 62
 61
 60

0007124135

RETRY TO SENDER OWN
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

S77081.173

\$6.96
US POSTAGE
FIRST-CLASS
06251329232
87501
000129354



Antonio Ramirez

NIXIE 750 FE 1 0007/03/21

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 87504105656 *0968-01077-28-42

ANK

86250430512

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



0640 0000 1388 2124

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

Total Postage and Fees

Sent To

Antonio Ramirez
P.O. Box 512
Loving, New Mexico 88256

City, State, ZIP+4®

Postmark
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

S77081.178

\$6.96
US POSTAGE
FIRST-CLASS
06251329232
87501
000129349



Rafael M. Madrid

P.O. Box 13

000756

NIXIE 750 FE 1 0007/03/21

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



0640 0000 1388 1820

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

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Rafael M. Madrid
P.O. Box 13
Loving, New Mexico 88256

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S77081.158

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 FIRST-CLASS
 06251329292
 87501
 000129369



Heirs or devisees of Jackye Earle White,
 who apparently are the heirs or devisees
 of James Earl Turner
 1411 E. 12th Street

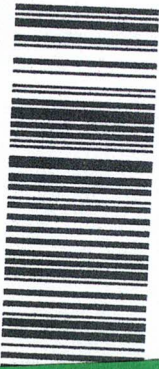
NIXIE 750 DE 1 0007/21/21
 RETURN TO SENDER
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BC: 87504105656 *0968-01073-28-42

UNC
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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
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☐ Adult Signature Restricted Delivery \$

Postage

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Total Postage and Fees

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Street and Apt. No., or PO BOX NO.

City, State, ZIP+4®

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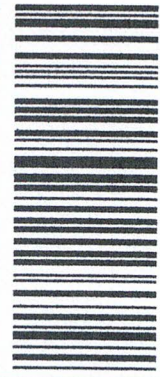
See Reverse for Instructions

Heirs or devisees of Jackye Earle White,
 who apparently are the heirs or devisees
 of James Earl Turner
 1411 E. 12th Street
 Sweetwater, Texas 79556

Postmark
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See Reverse for Instructions

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 P.O. Box 275
 Loving, New Mexico 88256

Postmark
 Here

Terry Hill f/k/a Terry L. Calk
 P.O. Box 275

NEW MEXICO 88256

NIXIE

750 FE 1

0007/03/21

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☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

Total Postage and Fees

Sent To

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See Reverse for Instructions

O.L. Robinson and
wife Doreitha Robinson
407 3rd Street

NIXIE

750 FE 1

0007/03/21

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BC: 87504105656

UTF

8750410565602

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☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

Total Postage and Fees

Sent To

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Teresa Juarez
P.O. Box 10
Bunice, New Mexico 88231

Postmark
Here

Teresa Juarez
P.O. Box 10

New Mexico 88231

NIXIE

750 FE 1

0007/03/21

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 87504105656

ANK

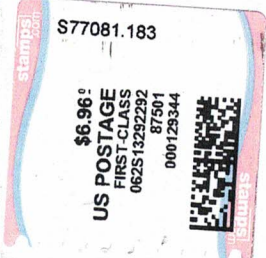
*0968-01034-28-47

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US POSTAGE
FIRST-CLASS
062513292392
87501
000129359



7-1-21



6/30
JH

Salem Pecos Stribling
7319 Via Contenta NE

NIXIE 87101 07/23/2021

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UNCLAIMED
SORT IN MANUAL ONLY NO AUTOMATION
BC: 5698899955

UNC

8710107232021



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☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

\$

Total Postage and Fees

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Sent To

Lucila Ramirez
120 Pear Street
Roswell, New Mexico 88201

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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See Reverse for Instructions

Lucila Ramirez
120 Pear Street

Roswell, New Mexico 88201

NIXIE

750 FEB 1

0007/03/21

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UNABLE TO FORWARD

UTF

BC: 87504105555

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\$6.96⁰
 US POSTAGE
 FIRST-CLASS
 06251329232
 87501
 000129339



Eva Melba McGinnis
 415 S. 5th Street

NIXIE 750 FE 1 0007/03/21

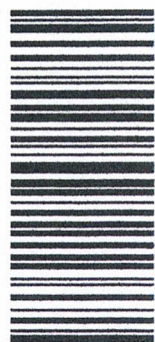
RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD

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3758025639618

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☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$
 Total Postage and Fees

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City, State, ZIP+4®

Eva Melba McGinnis
 415 S. 5th Street
 Loving, New Mexico 88256

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