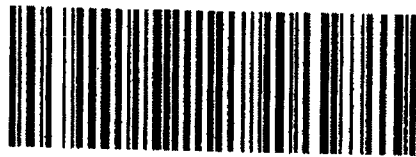


Threadgill Law Firm, PLLC
6999 E. Business I-20
Odessa, Texas 79762

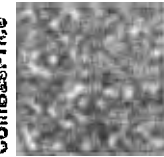
*Scanned
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Cleared
9/28/13*



7012 2920 0001 1112 6357



Priority Mail
Compass Price



UNITED STATES POSTAGE
02 1P \$0
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MAILED FROM ZIP C

KA

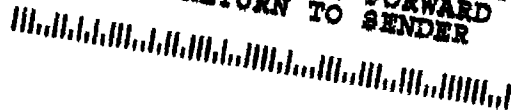
Ms. Irene Tallman
25th Ave.
Longview, WA 98632

NIXIE

986322017-1N

09/26/13

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER

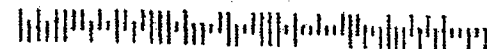


PENGAD 800-631-6989

EXHIBIT

Reliant
H

mch 4/17/14



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ms. Elene Tallman
25th Ave.
Longview, WA
98632

2. Article Number

(Transfer from service label)

7012 2920 0001 1112 6357

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

Threadgill Law Firm, PLLC
6999 E. Business I- 20
Odessa, Texas 79762

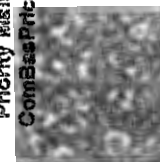


7012 2920 0001 1112 6371



UNITED WE STAND

Priority Mail
ComBase Price



02 1P \$01
0004498716 SEP 2
MAILED FROM ZIP CODE

IA



Ms. Anna Clapp
Carson, WA 98610

AR

Return

NIXIE

986102054-1N

09/25/13

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER



IA

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ms. Anna Clapp
Carson, W.A.
98610

2. Article Number
(Transfer from service label)

7012 2920 0001 1112 6371

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1640

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

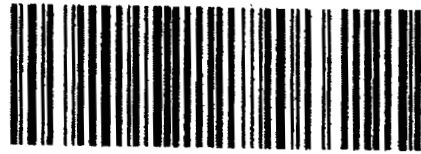
3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

Threadgill Law Firm, PLLC
6999 E. Business I- 20
Odessa, Texas 79762



7012 2920 0001 1112 6364



Priority Mail
Combat Pricing



UNITED STATES POSTAGE
02 1P \$010
0004498716 SEP 2
MAILED FROM ZIP CODE

SBC
9/8/13

1A

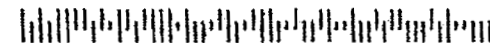
Ms. Ethel Fermstad
316 53rd Avenue E
Seattle, WA 98105

NIXIE

981052018-1N

09/25/13

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ms. Ethel Stumstad
316 53rd Ave. E
Seattle, WA.
98105

2. Article Number

(Transfer from service)

7012 2920 0001 1112 6364

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

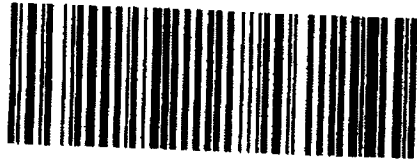
3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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6999 E. Business I- 20
Odessa, Texas 79762



7012 2920 0001 1112 6401



Priority Mail
Combas Price



UNITED STATES POSTAGE
02 1P \$010
0004498716 SEP 20
MAILED FROM ZIP CODE

3BC
9/28/13

-
- ☒ Not Deliverable As Addressed
☐ Unable To Forward
☐ Insufficient Address
☐ Moved, Left No Address
☐ Unclaimed ☐ Refused
☐ Attempted - Not Known
☐ No Such Street ☐ Number
☐ Vacant ☐ Illegible
☐ No Mail Receptacle
☐ Box Closed - No Order
☐ Returned For Better Address
☐ Postage Due

~~Ms. Audrey Koski
Route 1 Box 52
Raymond, WA 98577~~

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ms. Audrey Koski
Route 1, Box 52
Raymond, WA
98577

2. Article Number
(Transfer from service label)

7012 2920 0001 1112 6401

PS Form 3811, February 2004

Domestic Return Receipt

102594-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

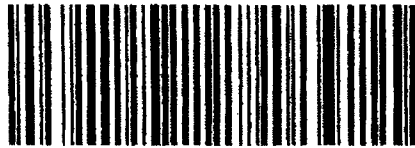
3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

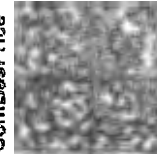
Threadgill Law Firm, PLLC
6999 E. Business I-20
Odessa, Texas 79762



7012 2920 0001 1112 6395

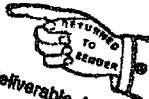


Priority Mail
Compliance



UNITED STATES POSTAGE
02 1P \$010
0004498715 SEP 2
MAILED FROM ZIP CODE

Scanned
Bus
Closed
9/28/13

-  RETURN TO SENDER
- ☒ Not Deliverable As Addressed
Unable To Forward
- ☐ Insufficient Address
 - ☐ Moved, Left No Address
 - ☐ Unclaimed ☐ Refused
 - ☐ Attempted - Not Known
 - ☐ No Such Street ☐ Number
 - ☐ Vacant ☐ Illegible
 - ☐ No Mail Receptacle
 - ☐ Box Closed - No Order
 - ☐ Returned For Better Address
 - ☐ Postage Due _____



~~Ms. Rose Gideon
Sandell Street
Raymond, WA 98577~~

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ms. Rose Gideon
Sandell Street
Raymond, WA
98577

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

- ☐ Yes

2. Article Number

(Transfer from service label)

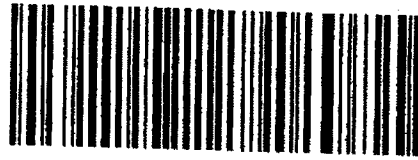
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PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

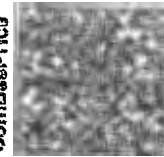
Threadgill Law Firm, PLLC
6999 E. Business I-20
Odessa, Texas 79762



7012 2920 0001 1112 6388



Priority Mail
CombiPrice

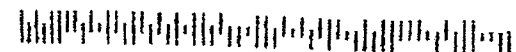


UNITED STATES POSTAGE
02 1P \$01
0004498716 SEP
MAILED FROM ZIP CODE

Mr. A.D. Daniston
I Street
Arcata, CA 98577

NIXIE 985771006-1N 10/21/13

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER



1A

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. A.D. Deniston
I Street
Arcata, CA
98577

2. Article Number
(Transfer from service label)

7012 2920 0001 1112 6368

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes