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

APPLICATION OF MATADOR PRODUCTION COMPANY FOR COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO.

Case No. 15,484

#### AFFIDAVIT OF NOTICE

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

James Bruce, being duly sworn upon his oath, 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 Matador Production Company.
- Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
- Notice of the application was provided to the interest owner, at their last known correct addresses, by certified mail. Copies of the notice letter and certified return receipt are attached hereto as Attachment A.
- Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.

SUBSCRIBED AND SWORN TO before me this 20th day of April, 2016 by James

Bruce.

OFFICIAL SEAL Notary Public State of New Mexico My Commission Expires 10-227

Oil Conservation Division Case No. 15484

Exhibit No. 8

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

April 4, 2016

#### CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Wolfcamp well in the S½ of Section 5, Township 24 South, Range 28 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, April 28, 2016, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the 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, April 21, 2016. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its 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.

Verý truly yours,

James Bruce

Attorney for Matador Production Company

Attachment \_\_\_\_\_\_\_

#### EXHIBIT A

Jack Francis Habig 9414 East 85th Street Raytown, MO 64138

Carol L. Habig Apartment 3 8718Wornall Road Kansas City, MO 64114

Marcia A. Nash 2613Clark Avenue Billings, MT 59102

Frederick J. Stuessi 5625 Hall Street Shawnee, KS 66217

Ellen Stuessi Larken Geisenbergstr 18 66892 Bruchmuhlbach Federal Republic of Germany

Nicole (Arlene) Stuessi Yates 11524 SE 221st Place Kent, WA 98031

Roger Davis Stuessi 19219 35th Place NE Lake Forest Park, WA 98155

Kevin Adams Stuessi Apartment G 221 West 78th New York, NY 10024

Kelli Arleen Stuessi Clifford 8119 Chestnut Glen Avenue Las Vegas, NV 89131

Wesley Everett Stuessi Apartment F5 3300 Kauai Court Reno, NV 89509 Riley George Steesy 210 Iris Way Venture, CA 93004

Melanie May Steesy Stewart 21 Glen Burnie Road Palmyra, VA 22963

Katherine Forest Stacey Baxter 310 Alma Real Drive Pacific Palisades, CA 90272

Ronald Beyersdorf 1440 25th Street SE Auburn, WA 98002

John Lewis Maris, Jr. 411 South Random Road Bailey, CO 80421

Greg W. Stuessi 121 Chesterfield Place SW Leesburg, VA 20175

Valerie J. Hoffman 5330 West Ridge Road Kansas City, KS 64108

David Stuessi Gillespie 9483 Garden Knoll Way Lakeside, CA 92040

Daniel W. Gillespie 9483 Garden Knoll Way Lakeside, CA 92040

James K. Gillespie 9483 Garden Knoll Way Lakeside, CA 92040

Carol Stuessi Dyson 2758 S 1020 W Nibley, UT 84321 Nancy J. Stuessi Miles 10791 Sienna Dune Drive South Jordan, UT 84095

Daniel Craig No. B-101 1390 Broadway Placerville, CA 95667

Karl Richard Stacey 318 Bordeaux Drive La Porte, IN 46350

Paula Stacey Leblanc 3056 Eastwood Terrace The Villages, FL 32163

Marian Stacey 3056 Eastwood Terrace The Villages, FL 32163

Jamie Cohen-Stacey 3056 Eastwood Terrace The Villages, FL 32163

Jeannette Stacey 3056 Eastwood Terrace The Villages, FL 32163

Karl F. Myers, Individually and as Guardian for Frank Myers Apartment E 6245 North London Avenue Kansas City, MO 64151

Beth Cagle Webster P.O. Box 282 Lake Orion, Michigan 48361

Joshua R. Bowen Apartment A 1210 Ridge Circle Tonganoxie, KS 66086 Robert J. Bowen 19137 Cantrell Road Linwood, KS 66052

Kimberly A. Woehrman 16016 Prairie Way Basehor, KS 66007

Joanne Johnson No. 217 2700 Somerset Drive Prairie Village, KS 66206

Steve Hodge P.O. Box 3111 Ranchos de Taos, NM 87557

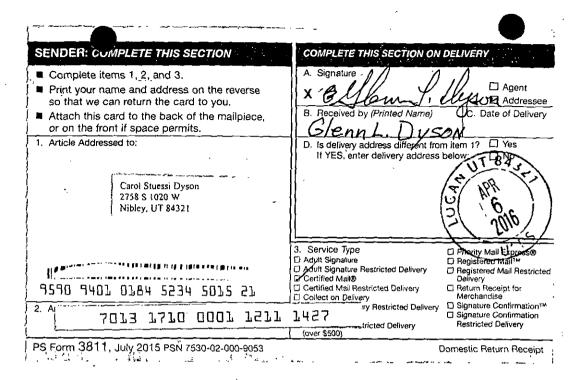
John M. Pickard No. 914 8707 East Florida Avenue Denver, CO 80231

Laurel J. Pickard 8305 West Dana Street Milwaukee, WI 53214

Robert D. Pickard 417 Apple Avenue Albertville, AL 35950

Delbert Joseph Fitzgerald Estate c/o Delbert Joseph Fitzgerald, Jr. Apartment 1405 2411 East 7th Street Tulsa, OK 74146

Delbert Joseph Fitzgerald Estate c/o Richard Fitzgerald 4806 East 37th Place Tulsa, OK 74135



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| ļ     | PS Form 3800, August 2                            | 006                      |       |      |            | See Reverse for Instruction | ins |

| Print your name and address on the reverse so finat 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:    Nicole (Arlene) Stuessi Yates   11524 SE 221st Place   Kent, WA 98031   | SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON D   | <del></del>   |
|---|--|--|---|
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| <ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> | D. Is delivery address different from item 1?  | (Oomestic Mall Only; No Insurance Coverage Provided)  For delivery information visit our, website at www.usps.coms  Postage  Certified Fee  Return Receipt Fee  Return Receipt Fee  Return Receipt Fee  Return Receipt Fee |
| Greg W. Stuessi 121 Chesterfield Place SW Leesburg, VA 20175  | 3. Service Type □ Priority Mail Express® □ Adult Signature □ Registered Mail™ □ Registered Mail Restricted   | Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees    Sent To   Jack Francis Habig   |
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COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. □ Agent ■ Print your name and address on the reverse Addressee so that we can return the card to you. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. 1. Article Addressed to: D. Is delivery address different from item If YES, enter delivery address below; ₹ ." Carol L. Habig Apartment 3 \_ ;\* 8718Wornall Road Kansas City, MO 64114 3. Service Type □ Priority Mail Express®
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| 7073      | Sent To Joshua R. Bowen Street, Apt. No.: Apartment A                          |  |
|           | or PO Box No. 1210 Ridge Circle City, State, ZIP+4 Tonganoxie, KS 66086        |  |
|           | PS Form 3800, August 2006  | 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.  Article Addressed to:  Steve Hodge P.O. Box 3!!! Ranchos de Taos, NM 87557 | A. Signature  B. Received by (Printed Name)  D. Is delivery address different from If YES, enter delivery address by           | Agent  Addressee  C. Date of Pelivery  |
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|  | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery | Priority Mail Express®     Registered Mail™     Registered Mail Restricted Delivery     Return Receipt for Merchandise |
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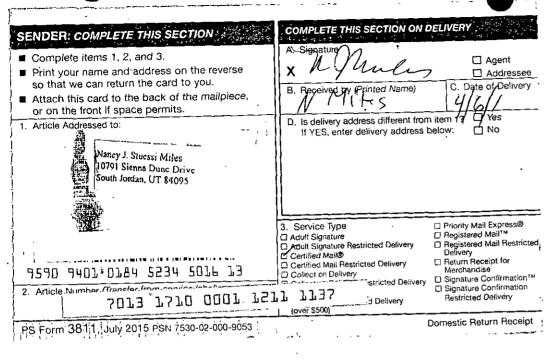
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| 3. Service Type   Adult Signature   Adult Signature   Adult Signature   Adult Signature   Adult Signature   Adult Signature   Certified Maik®   Certified Maik®   Collect on Deliver   Collect on Deliver   Collect on Deliver   7013 1710 0001 1211 1119 | Delivery   Beturn Receipt for |

| 168        | CERII                             | 100             |             |       |        |      |                 |        | verag |     | /OV          | ОŒ |
|------------|-----------------------------------|-----------------|-------------|-------|--------|------|-----------------|--------|-------|-----|--------------|----|
| г¬         | 郭For deliver                      | y Inf           | iii         | ation | visit  | OUI  | webs            | ite a  | www.  | 19: | 8.C0         |    |
| F-7        |                                   |                 | ii.         |       | C      |      |                 | (I     |       | )   | S            |    |
| iui<br>Fin |                                   | Post            | age         | \$    |        |      |                 |        |       |     |              |    |
|            | Çe                                | rtified I       | Fee         |       |        |      |                 |        |       | _   |              |    |
| 0001       | Return Re<br>(Endorsement         |                 |             |       |        |      |                 |        |       |     | stma<br>Here | rĸ |
| 710        | Restricted De<br>(Endorsement     | livery<br>Requi | Fee<br>rod) |       |        |      |                 |        |       |     |              |    |
| 7          | Total Postaç                      | e&F             | ees         | \$    |        |      |                 |        |       |     |              |    |
| m          | Sent To                           | <del>-</del> -  |             | Paula | Stace  | y Le | blanc           |        |       |     |              |    |
| 707        | Street, Apt. No.<br>or PO Box No. | ).;             |             | 3056  | Eastwe | boc  | Теггас<br>23216 | e<br>3 |       |     | <b>-</b>     |    |
|            | City, State, Zil                  | 5+4             |             |       |        |      |                 |        |       |     |              |    |

| 1199 | 室(Domestic Mai)   | DMAIL等RE  | Coverage Provided) 🔏 |
|------|---|---|----------------------|
| 1211 | O F F   | CIAI  | USE                  |
| 0007 | Cartified Fee<br>Return Receipt Fee<br>(Endorsement Required)           |   | Postmark<br>Here     |
| 1710 | Restricted Delivery Fee<br>(Endorsement Required)  Total Postage & Fees | \$  |                      |
| F107 | Street, Apl. No. 305  | nnette Stacey<br>6 Eastwood Terrace<br>Villages, FL 32163 |                      |

| ■ 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:  Paula Stacey Leblanc 3056 Eastwood Terrace The Villages, FL 32163 | A. Signature  X |
|---|-----------------|
| 9590 9403 0589 5183 8933 01  2. Article Number, Transfer from service labell  | 3. Service Type |



| EDH  | U.S. Postal Service  | ALC: UNKNOWN |                | ided)        |
|------|--|--------------|----------------|--------------|
| H    | For delivery information visit our, website at wy  | w.us         | ps.co          | mo see L     |
| 7    | OFFICIAL   |              | 2              |              |
| 1.2  | Posiage \$   |              |                |              |
| 1000 | Certified Fee  Return Receipt Feo (Endorsement Required)   | F            | ostmai<br>Here | rk ,         |
| 1710 | Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees Common Restricted Postage & Fe |              |                |              |
| 7013 | Sont To  Delbert Joseph Fitzgerald Estate  c/o Delbert Joseph Fitzgerald, Jr.  Apartment 1405  Sireet, Apt. No.; 2411 East 7th Street  or PO Box No. Tulsa, OK 74146  City, State, ZiP+4   |              |                |              |
| ĺ    | PS Form 3800, August 2006  | Reve         | se for         | Instructions |

| 1137      | U.S. Postal Service  CERTIFIED MAIL RE Oomestic Mail Only; No Insurance  | Coverage Provided            |
|-----------|--|------------------------------|
| 1211      | For delivery information visit our websit  | e at www.uspa.como m         |
| 1710 0001 | Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  -Total Postage & Fees                              | Postmark<br>Here             |
| 7013      | Sent To Nancy J. Stucssi Miles Street, Api. No.: 10791 Sienna Dunc Drive or PO Box No. South Jordan, UT 84095 City, State, ZiF. 4  28 Form 3800, August 2006 | See Reverse for Instructions |

| - The state of the | 1  |
|--|--|
| 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:  Delbert Joseph Fitzgerald Estate c/o Delbert Joseph Fitzgerald, Jr. Apartment 1405 24 Jl East 7th Street Tulsa, OK 74146   | A. Signature    Adviressee   Adviressee   Adviressee   B. Received by (Parted Name)   Adviressee   Adv |
| 9590 9401 0184 5234 5016 06  | 3. Service Type  ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Signature Confirmation ☐ Signature Confirmation  |
| 712 TOOO OOT 7577  | ☐ Signature Confirmation Restricted Delivery ☐ (over,\$500)  |
| PS Form 381 11, July 2015 PSN 7530-02-000-90531  | Domestic Return Receipt  |

| No. in   |  |  |
|--|--|--|
| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON I   | DELIVERY   |
| <ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature  B. Received by (Printed Name)  | Accent  Addressee  C. Date of Delivery   |
| Robert D. Pickard 417 Apple Avenue Albertville, AL 35950   | D. Is delivery address different from<br>If YES, enter delivery address b  |  |
| <br>  9590 9401 0184 5234 5015 90  | 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☐ Return Receipt for Merchandise ☐ Signature Confirmation™☐ |
| 2. 7013 1710 0001 1211 1   | -  | Signature Confirmation Restricted Delivery   |
| PS Form 3811, July 2015 PSN 7530-02-000-9053   | ٥  | omestic Return Receipt   |

| 5         |  |   | IPT '                 |         |
|-----------|--|---|-----------------------|---------|
| 11 117    | For delivery informati   |   | www.usps.como.==      | 18      |
| 1727 1000 | Certified Fee  Return Receipt Fee (Endorsement Required)   |   | Postmark<br>Here      | * \$    |
| 2013 1710 | Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees  Sent To  Street, Apt. No.; | \$  Marian Stacey  3056 Eastwood Terrace The Villages, FL 32163 |                       | *       |
| 1         | or PO Box No. City, State, ZIP+4 PS Form 3800, Augus   | 2006 三世紀 聖皇祖 法规则证据  | See Reverse for Instr | uctions |

| 7.000     | (Comestic Mail Only; No Insurance Cov  | er and the second        |
|-----------|--|--------------------------|
| 121       | DEFICIAL   | www.eps.com              |
| 1710 0001 | Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees                   | Postmark<br>Here<br>-    |
| 7013      | Sent To Robert D. Pickard  Street, Apl. No.; 417 Apple Avenue or PO Box No. Albertville, AL 35950  City, State, ZiP+4  PS Form 3800, August 2006 | leverse 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.  Article Addressed to:  Marian Stacey 3056 Eastwood Terrace The Villages, FL 32163 | A. Signature  X Pul Le Blcu B. Received by (Printed Name)  Tund Le Blunc D. Is delivery address different from If YES, enter delivery address  | Agent Addressee C. Date of Delivery A S I Committee 1? Yes  |
| 9590 9403 0589 5183 8934 17  2. Av. 7013 1710 0001 1211  | 3. Service Type  Adult Signature Adult Signature Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Collect on Delivery Collect on Delivery Restricted Delivery  1.175 | ☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Restricted Delivery |
| PS Form 3811 April 2015 PSN 7530-02-000-9053   |  | Domestic Beturn Receipt   |

| 1、江南縣 四十   |   |
|--|---|
| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY   |
| <ul> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:         <ul> <li>Kimberly A. Woehrman 16016 Prairie Way Basehor, KS 66007</li> </ul> </li> </ul> | A. Signature  X  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:  No |
| <u>.</u>   | 3. Service Type □ Prionty Mail Express® □ Registered Mail™ □ Registered Mail™ □ Registered Mail Restricted  |
| 9590 9401 0184 5234 5015 45  | □ Certified Mail Restricted Delivery □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery                               |
| 2. Art 7013 1710 0001 1211   | Collect on Delivery Restricted Delivery ☐ Signature Confirmation ☐ Signature Confirmation ☐ Signature Confirmation ☐ Restricted Delivery            |
| PS Form 3811, July 2015 PSN 7530-02-000-9053   | Domestic Return Receipt   |

|         | U.S. Postal S   | は 小 小 八 日本   | EIRT - E                     |
|---------|---|--|------------------------------|
| 7.7.4.H | (Domestic Mail Or<br>For delivery informa                             | nly; No Insurance Co<br>tion visit our website at    | verage r. o                  |
| 1217    | OF F  | SCIAL  | U O IL                       |
| 0001    | Certified Fee   |  | Postmark<br>Here             |
| 1       | (Endorsement Required) Restricted Delivery Fee (Endorsement Required) |  |                              |
| 1710    | Total Postage & Fees  | Daniel Craig   |                              |
| 7013    | Sent To  Street, Apt. No.; or PO Box No.                              | No. B-101<br>-1390 Broadway<br>Placerville, CA 95667 |                              |
| }       | City, State, ZIP+4 PS Form 3800, Augus                                | it 2006 單點的是單學語句                                     | ir See Reverse for Instructi |

| 7345<br>7345 | U.S. Postal S<br>CERITIFIEL<br>(Domestic Mail O | ) MA<br>nly; No                       | L <sub>TI</sub> , l | RE( | overage  | Provi    |         |       |
|--------------|---|---------------------------------------|---------------------|-----|----------|----------|---------|-------|
| 17.7         | OFF   |                                       |                     |     | . U      | S        |         |       |
| 김            | Postage   | s                                     |                     |     |          |          |         |       |
| 1000         | Certified Fee                                   |                                       |                     |     |          | Postmark |         |       |
| 日            | Return Receipt Fee<br>(Endorsement Required)    |                                       |                     |     | •        | Here     | ,       |       |
| 1710         | Restricted Delivery Fee (Endorsement Required)  |                                       |                     |     |          |          |         |       |
| 14           | / Total Postage & Fees                          | \$                                    |                     |     |          |          |         |       |
| 7013         | l 1   | imberly A<br>6016 Prair<br>Jusehor, K | ie Way              | man |          |          |         |       |
| 1            | City, State, ZiP+4 PS Form 3800, August 2       | 006                                   | F257/2              |     | See Reve | rse for  | Instruc | tions |

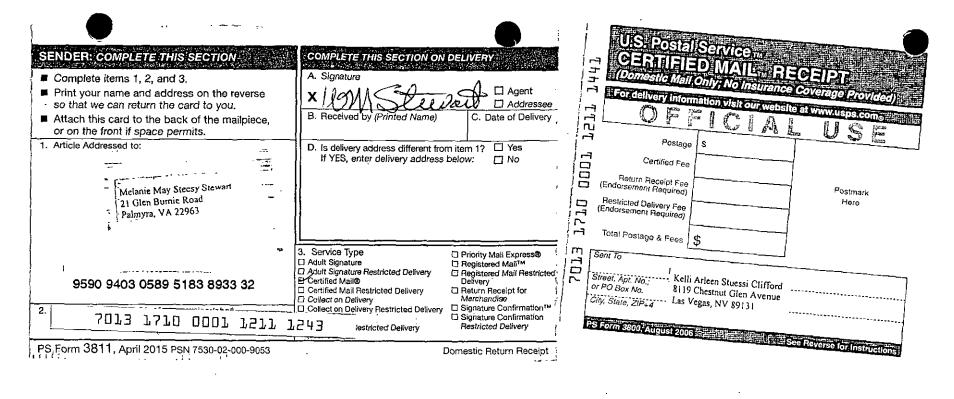
| SENDER: COMPLETE THIS SECTION.   | COMPLETE THIS SECTION ON E  | DELIVERY  |
|--|---|---|
| Complete items 1, 2, and 3.  Print your name and address on the reverse so that we can return the card to you:  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  Daniel Craig No. B-101 1390 Broadway Placerville, CA 95667 | A. Signature  X  B. Received by (Printed Name)  Athera Geraci  D. Is delivery address different from If YES, enter delivery address I                   | Agent Addressee C. Date of Delivery  5-10  nitem 1? Yes below: No   |
|  | 3. Service Type  Adult Signature  Adult Signature  Certified Mail®  Certified Mail®  Certified Mail®  Collect on Delivery  Collect on Delivery  I J 4 4 | □ Priority Mail Express® □ Registered Mail* □ Registered Mail Restricted Delivery □ Return Receipt for Merchandiss □ Signature Confirmation* □ 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  |
|--|--|
| <ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature  X   Dulan   Din   Agent   Addressee  B. Peceived by (Printed Name)   C. Date of Delivery |
| 1. Article Addressed to:  Laurel J. Pickard 8305 West Dana Street Milwaukee, WI 53214  | D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No         |
| 9590 9401 0184 5234 5015 83  | 3. Service Type  |
| 7013 1710 0001 1211 PS Form 3811, July 2015 PSN 7530-02-000-9053   | (over \$500)    Signature Confirmation   Restricted Delivery   |
| * ****** *** ****** * * * * * * * * * *  | •  |

| ssee                          | U.S. Postal Service CERTIFIED MAIL REC                     |                          |
|-------------------------------|--|--------------------------|
| ivery ,                       | asirvel y information visit our website a                  | WWW.Lisha                |
|                               | G OFFICIAL   |                          |
| <del></del>                   | Π  | USE                      |
|                               | Postage \$   |                          |
| ,<br>,                        | Certified Fee  Return Receipt Fee (Endorsement Required)   | Posimark<br>Here         |
|                               | Restricted Delivery Fee (Endorsement Required)             | rere                     |
| s®                            | ostage & Fees 1 %  |                          |
| tricted                       | Joanne Johnson No. 217 Street, Apt. No.; Street, Apt. No.; |                          |
| ion <sup>tm</sup><br>ion<br>' | City, State, ZIP+4   |                          |
| eipt :                        | PS Form \$800, August 2006 *** United See                  | Reverse for Instructions |

| ,380           | U.S. Postal S<br>CERTIFIEL<br>(Domestic Mall, o | ) MAI<br>nly; No l               | L <sub>m</sub> R | e Cov  | erage   | Provid      | ART LAND TO THE POST OF PAR |
|----------------|---|----------------------------------|------------------|--------|---------|-------------|-----------------------------|
| <br> <br> <br> | For delivery inform                             |                                  | our,web          | 104814 |         | ps.com<br>S |                             |
|                | Postage   | \$                               |                  |        |         |             |                             |
| 17.0           | Certified Fee                                   |                                  |                  |        |         | ostmark     |                             |
|                | Return Receipt Fee<br>(Endorsement Required)    |                                  |                  |        |         | Here        |                             |
| 70             | Restricted Delivery Fee (Endorsement Required)  |                                  |                  |        |         |             |                             |
| 14             | Total Postage & Fees                            | \$                               |                  |        |         |             |                             |
| 13             | Sent To   | :<br>  Laure  J. F<br>  8305 Wes |                  | a.a.l  |         |             |                             |
| 70             | Street, Apt. No.;<br>or PO Box No.              | Milwauke                         |                  |        |         |             |                             |
| į              | City, State, ZIP+4                              |                                  | ~                |        |         |             |                             |
| j              | PS Form 3800, August 2                          | 2006 ≅7 <u>1.</u> ∜±1.           | 46.5 <u>.</u> 16 | #∷#s   | ee Reve | rse for in  | structions                  |

|   |   | or the state of th |  | Service Constitution   |
|---|---|--|--|--|
| SENDER: COMPLET   | E THIS SECTION                          |  | COMPLETE THIS SECTION ON   | DELIVERY   |
| ■ Complete items 1, 2   | 2, and 3.                               |  | A. Signatule   | 7  |
| •   | d address on the reve                   | rse  | x Susan To   | Agent ☐ Agent ☐ Addressee  |
| so that we can retu   | •                                       |  | B. Received by (Printed Name)  | C. Date of Delivery  |
| <ul> <li>Attach this card to to<br/>or on the front if spi</li> </ul> | the back of the mailpidace permits      | ece, i   | Swan Larson  |  |
| Article Addressed to:   | use politico.                           | المنافق في   | D. Is delivery address different fro<br>If YES, enter delivery address   | m item 1? Yes  |
|   | <u> </u>                                | 100  | l'I  |  |
| Joanne Joh<br>No. 217<br>2700.Som<br>Prairie Vil                      | inson<br>ersei Drive<br>Ilage, KS 66206 | 7  | ·  |  |
| No. 217<br>2700.Some<br>Prairie Vil                                   | erset Drive                             | V  | 3. Service Type  Adult Signature Restricted Delivery   | ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricte  |
| No. 217<br>2700.Some<br>Prairie Vil                                   | ersei Drive<br>llage, KS 66206          |  | □ Adult Signature     □ Adult Signature Restricted Delivery     ☑ Certified Mail®     □ Certified Mail Restricted Delivery | <ul> <li>☐ Registered Mail I<sup>TM</sup></li> <li>☐ Registered Mail Restricted</li> <li>☐ Delivery</li> <li>☐ Return Receipt for</li> </ul> |
| No. 217<br>2700 Som<br>Prairie Vil                                    | ersei Drive<br>Hage, KS 66206           | 5  | ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☑ Certified Mail®  | ☐ Registered Mail™ ☐ Registered Mail Restrict Delivery ☐ Return Receipt for Merchandise  |



| E H Z T                 | US.P.<br>CERT<br>(Domesii |  | EDI<br>IOniv                  |            |       | तः     |              |          |         |         |  |
|-------------------------|---------------------------|--|-------------------------------|------------|-------|--------|--------------|----------|---------|---------|--|
| 710 001 1211            |                           | Postag<br>fied Fee<br>eipt Fee<br>equired)<br>ary Fee<br>quired) | e \$                          | Visit<br>C | OUT W | reball | e at v       | WW.Us    | ps.co   | no is a |  |
| Stre.<br>or Pt<br>City, |                           | 1  | Melanie<br>21 Glen<br>Palmyra | Bumi       | e Roa | Stew   | art<br>See R | everse f | or Jost |         |  |

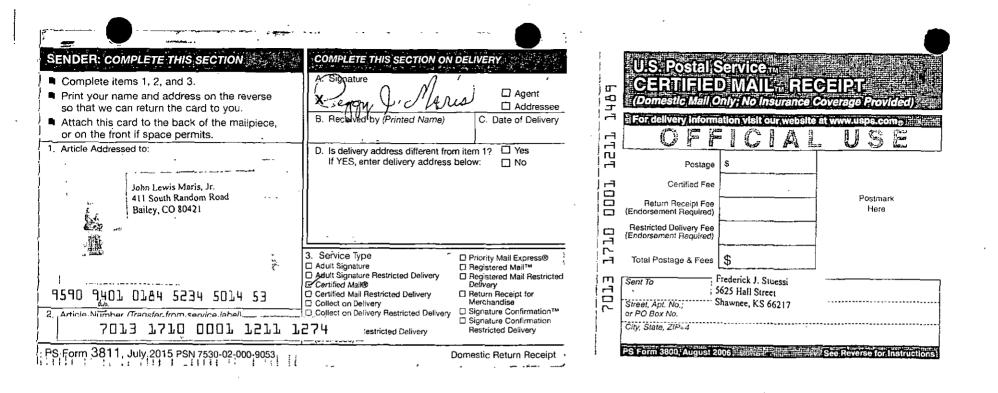
| Image: Adult Signature     □ Registered Mail™       Image: | SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  Kelli Arleen Stuessi Clifford 8119 Chestnut Glen Avenue Las Vegas, NV 89131 | A. Signature  X.   |
|---|---|--|
| 9590 9401 0184 5234 5022 76 Certified Mail Restricted Delivery Collect on Delivery  2. Article Number Transfer from service tabelt Confirm Signature Confirm Signature Confirm  | 2. Article Number, Transfer, from service Jaholi  | □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® □ Certified Mail® Restricted Delivery □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery □ Signature Confirmation |

| ■ 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:  Jamie Cohen-Stacey 3056 Eastwood Terrace The Villages, FL 32163 | COMPLETE THIS SECTION ON DELIVERY  A. Signature  A. Signature  A. Signature  Adgent  Address  B. Beceived by (Printed Name)  C. Date of Deliv  Taulal Bana 45/4  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No |
|---|--|
| 9590 9403 0589 5183 8934 00  2. Article Number Transfer from service labell   | 3. Service Type  Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Restricted Delivery Collect on Delivery Restricted Delivery Signature Confirmatio                                  |

|  | D MAIL RECL  |                          |
|--|--|--------------------------|
| LI O iii Postage   | mation visit our website at                              | www.usps.com             |
| Return Receipt Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees |  | Postmark<br>Hera         |
| Sent To  Street, Apt. No.; or PO Box No. City, State, ZiP+4  PS Form 3800, August 20   | Marcia A. Nash<br>2613Clark Avenue<br>Billings, MT 59102 | Neverse for instructions |

| 1182   | (Domestic Mail C  | Service THE FE<br>DIMAIL THE CONTROL OF CONTROL | Coverage Provided) 📰 🏝      |
|--------|---|---|-----------------------------|
| 211    | OFF   | CIAL  | . USE                       |
| 1 1000 | Postage  Certified Fee  Return Receipt Fee (Endorsement Required)       | S   | Postmark<br>Here            |
| 1710   | Restricted Delivery Fee<br>(Endorsement Required)  Total Postage & Fees | \$  |                             |
| 7013   | Street Ant No 305   | nie Cohen-Staczy<br>56 Eastwood Terrace<br>le Villages, FL 32163  | See Reverse to instructions |

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY   |
|--|---|
| <ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature  X. Marcea Mah.   Agent   Addressee  B. Received by (Printed Name)   C. Date of Delivery   |
| 1. Article Addressed to:  Marcia A. Nash  2613Clark Avenue   | D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No  |
| Billings, MT 59102   | 3. Service Type □ Priority Mail Express® □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Registered Mail Restricte □ Delivery   |
| 9590 9401 0184 5234 5023 20<br>2_Article.Number.(Transfer.from.service.label)  | ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery Restricted Delivery ☐ Collect on Delivery Restricted Delivery    Signature Confirmation   Signature Confirmation   Signature Confirmation   C |



| 1274        | (Domestic Mail C   | Service 116 REC<br>DIMAIL 116 REC<br>Driv; No Insurance C<br>lation visit our, website 8 | overage Provided) 🖽 🗐        |
|-------------|--|--|------------------------------|
| 211         | O F F  | ICIAL  | USE                          |
| 1710 0001 1 | Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) |  | Postmark<br>Here             |
| 7013 T      |  | John Lewis Maris, Jr.<br>411 South Random Road<br>Bailey, CO 80421                       | 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.  Article Addressed to:  Frederick J. Stuessi 5625 Hall Street Shawnee, KS 66217 | B. Received by (Printed Name)  D. Is delivery address different from If YES, enter delivery address | ☐ Agent ☐ Addressee C. Date of Delivery                                  |
|---|---|--|
|   | Service Type     Adult Signature     Adult Signature  | ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted |
|   | Certified Mail® Certified Mail Restricted Delivery Collect on Delivery                              | Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™      |
| 2. Article Number (Transfer from service label) 7013 1710 0001 1211   | Collect on Delivery Restricted Delivery   | ☐ Signature Confirmation<br>Restricted Delivery                          |
| PS Form 3811, July 2015 PSN 7530-02-000-9053  | , ;;A   | Domestic Return Receipt  |

| 1,205        | U.S. Postal Service  | verage Provided)           |
|--------------|--|----------------------------|
| 1211         | OFFICIAL Postage \$  | USE                        |
| 0007         | Certified Fee  Return Receipt Fee (Endorsament Required)   | Postmark<br>Here           |
| 1710         | Restricted Delivery Foo (Endorsement Required)  Total Postage & Fee Karl F. Myers, Individually and  |                            |
| 7013         | as Guardian for Frank Myers  Apartment E  Street, Apt. No.; or PO Box No.  as Guardian for Frank Myers  Apartment E  6245 North London Avenue  Kansas City, MO 64151 |                            |
| <u> </u><br> | City, State, ZIP+4 PS Form 3800, August 2006   | e Reverse for Instructions |

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11:11

|     | ,                          | 1   | *****    |
|-----|--|---|----------|
|     | }  |   | 1        |
| i   | SENDER: COMPLETE THIS SECTION                                    | COMPLETE THIS SECTION ON DELIVERY   | ·        |
| - 1 | ■ Complete items 1, 2, and 3.                                    | A. Signature  |          |
| - 1 | ■ Print your name and address on the reverse                     | X Agent   |          |
| Ì   | so that we can return the card to you.                           | □ Addressee   | l a      |
| 1   | Attach this card to the back of the mailpiece,                   | B. Fr. Jet ecopy Printed Name C. Date of Delivery   |          |
| í   | Article Addressed to:  | D. Is delivery address different from item ?  |          |
| , , | Karl F. Myers, Individually and                                  | If YES are delivery address is low  |          |
| - 1 | as Guardian for Frank Myers                                      | 1115 MAN  |          |
| i   | Apartment E  |   | <b>,</b> |
| ļ   | 6245 North London Avenue<br>Kansas City, MO 64151                |   | 4        |
| f   | Kansas City, MO 64151  | 1   | ·        |
| 1   | 1  | 1   |          |
| 1.  | •  | 3. Service Type Priority Mail Express®  |          |
| 1   |  | 3. Service type   | ·传·诗。    |
| 1   | ·  | ☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted                        |          |
| 1   | 9590 9403 0589 5183 8933 87                                      | ☐ Certified Mail Restricted Delivery ☐ Return Receipt for                                 |          |
| ļ   |  | ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™ | į        |
| (   | 2. Article Number (Transfer from contine label)                  | Cignature Confirmation 1  | 1        |
| ,   | 1151 1000 0171 6107  | 1205 incted Delivery Restricted Delivery  | 120      |
| i i | DO 5 1 2011 1 1 2015 TO 1 20 00 00 00 00 00 00 00 00 00 00 00 00 | [ (Oxel 4000)   Vis 1900   F. (17)  | 7 F.M. 🛊 |
| 1   | PS Form 3811, April 2015 PSN 7530-02-000-9053                    | Domestic Return Receipt   | د بدودها |

| G OFFICIAL (Postage \$   | JSE              |
|--|------------------|
| Postage \$   |                  |
|  |                  |
| Centitied Fee  | Dooboods.        |
| ☐ Certifled Fee ☐ Return Receipt Fee ☐ (Endorsement Required)  | Postmark<br>Here |
| Restricted Delivery Feo (Endorsement Required)   |                  |
| Restricted Delivery Feo (Endorsement Required)  Total Postage & Fees \$                                      |                  |
| Sent To  Katherine Forest Stacey Baxter  310 Alma Real Drive Pacific Palisades, CA 90272  City, State, ZIP+4 |                  |

|  | <del></del>  | 1-11-1-11-1-11-1  |
|--|--|---|
|  | , 117 117 111 111  | 1 111 1114  |
| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON I   | DELIVERY  |
| ■ Complete items 1, 2, and 3.  | A. Signature   | rational designation of the control |
| ■ Print your name and address on the reverse   | $\ _{X}$   | ☐ Agent "   |
| so that we can return the card to you.   |  | Addressee T   |
| Attach this card to the back of the mailpiece,   | B. Received by (Printed Name)  | C. Date of Delivery   |
| or on the front if space permits.  |  | , ,   |
| Article Addressed to:  | D. Is delivery address different from<br>If YES, enter delivery address to |   |
|  | ii 125, etitel delivery address t  | . Ц 140 .)  |
| Katherine Forest Stacey Baxter   | lj.  | , ;   |
| § 310 Alma Real Drive  |  |   |
| Pacific Palisades, CA 90272  |  | 1   |
|  |  | 1   |
| and the second s |  | 3   |
| ,  | 3. Service Type □ Adult Signature  | ☐ Priority Mail Express® (☐ Registered Mail™  |
|  | ☐ Adult Signature Restricted Delivery                                      | ☐ Registered Mail Restricted  |
| 9590 9403 0589 5183 8933 25  | ☐ Certified Mail Restricted Delivery                                       | ☐ Return Receipt for  |
| O carried the same of the same opening to be the   | Collect on Delivery     Collect on Delivery Restricted Delivery            | Merchandise ↓  □ Signature Confirmation   ↓   |
| 2.   |  | ☐ Signature Confirmation Restricted Delivery  |
|  | LCDU Restricted Delivery   | nestricted belivery if  |
| PS Form 3811, April 2015 PSN 7530-02-000-9053  |  | omestic Return Receipt  |

| 373      | (Domestic Mail Or  | NALTME COVER                        |                              |
|----------|--|-------------------------------------|------------------------------|
| <u>,</u> | For delivery informa   | lon visit our website at ww         | USE                          |
| <u></u>  | OFE  | I that I have                       | <u> </u>                     |
| 1,21,1   | Postage  | \$                                  |                              |
| I        | Certified, Foe   |                                     | Postmark                     |
| 1000     | Return Receipt Fee<br>(Endorsement Required)   |                                     | Herè                         |
| 1        | Restricted Delivery Fee<br>(Endorsement Required)  |                                     |                              |
| 1710     | Total Postage & Fees   | \$                                  | <del>-</del> ·               |
| Ìm       | Sent To  | John M. Pickard                     |                              |
|          | THE TANK NO  | No. 914<br>8707 East Florida Avenue |                              |
| 12       | or PO Box No.  | Denver, CO 80231                    |                              |
| Ì        | City, State, ZIP+4   | •                                   | ALANS.                       |
| }        | and the last of the same of th | 2006                                | See Reverse for Instructions |
| - }      | PS Form 3800, Augus  | N. 2000                             |                              |

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY   |
|--|---|
| <ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature  X   |
| 1. Article Addressed to:  John M. Pickard No. 914 8707 East Florida Avenue Denver, CO 80231  | D. Is delivery address different from item 1?   |
| 9590 9401-0184 5234 5015 76 2. Article 7013 1710 0001 12   | 3. Service Type  Adult Signature  Adult Signature Restricted Delivery  Certified Mail® Collect on Delivery  Collect on Delivery  Collect on Delivery  Delivery  Delivery  Signature Confirmation Restricted Delivery  Restricted Delivery |

|      | U.S. Postal Service M. CERTIFIED MAIL MECONING MAIL MAIL MAIL MAIL Only; No Insurance Co. | overage Provided)            | , |  |
|------|---|------------------------------|---|--|
|      | Postage \$  | at www.usps.come.            |   |  |
|      | Certified Fee  Return Recoipt Fee (Endorsement Required)                                  | Postmark<br>Here             |   |  |
| 1710 | Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees                      |                              |   |  |
| 2013 | Street, Apt. No.; Street, Apt. No.; La Porte, IN 46350                                    |                              |   |  |
|      | City, State, ZIP+4 PS Form 3800, August 2005 Third Third Third Third                      | See Reverse for Instructions | , |  |

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|          | • |   |   |  |
|----------|---|---|---|--|
| '        |   | SENDER: COMPLETE THIS SECTION   | COMPLETE THIS SECTION ON E  | DELIVERY   |
|          |   | ■ Complete items 1, 2, and 3.   | A. Signature  | {  |
|          |   | Print your name and address on the reverse so that we can return the card to you.   | X   | ☐ Agent § ☐ Addressee ∮  |
|          | - | Attach this card to the back of the mailpiece,<br>or on the front if space permits. | B. Received by (Printed Name)   | C. Date of Delivery  |
|          |   | Article Addressed to:  Karl Richard Stacey  | D. Is delivery address different from<br>If YES, enter delivery address b       |  |
|          |   | 318 Bordeaux Drive<br>La Porte, IN 46350  |   | <b>!!</b><br>{1  |
|          |   | 1   |   | <u> </u>   |
|          | • | 1<br>0500 0403 0580 5183 8932 95  | ☐ Adult Signature<br>☐ Adult Signature Restricted Delivery<br>☑ Certified Mail® | ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for |
| <b>5</b> |   | 2. Article Number (Transfer from sentine label) 7013 1710 0001 1211 1               | ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery                 | Merchandise    Signature Confirmation  |
|          |   | PS Form 3811, April 2015 PSN 7530-02-000-9053                                       | Di-   | omestic Return Receipt   |

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|    |                 |   | in an experience                            | 7 40 1               |                              |
|----|-----------------|---|---|----------------------|------------------------------|
|    | 62              | <b>建筑工作</b> 电电子 "                                 | - 7   |                      |                              |
| i  | Ģ               | U.S. Postal Se                                    |   |                      |                              |
| ì  | 4               | CERTIFIED   |   |                      |                              |
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| 15 | 7 E             | (Domestic Mail O                                  |   |                      | COMPLETE STATE               |
| ١. | Ä ₽             | For delivery informat                             | ion visit ou                                | r website at         | WWW. Sarcolles at the common |
| į. | P               | OFF   |   | AL                   | USE.                         |
|    | 157<br>177<br>1 | Postage   | \$  |                      |                              |
|    |                 | Certified Fee                                     |   |                      | Postmark                     |
|    | 0007            | Return Receipt Fee (Endorsement Required)         |   |                      | Here                         |
|    | 707             | Restricted Delivery Fee<br>(Endorsement Required) |   |                      |                              |
|    | 1710            | Total Postage & Fees                              | \$  |                      |                              |
|    | 7013            |   | n Cagle Webs<br>). Box 282<br>(e Orion, Mic | ster<br>Shigan 48361 |                              |
|    |                 | City, State, ZIP+4 PS Form 3800; August           | 2006  |                      | See Reverse for Instructions |
|    | ļ               | PS Form 3800, August                              | ,   |                      |                              |

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVER   | <u>;</u>             |
|--|--|----------------------|
| <ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature  X  B. Received by (Printed Name)  C. E   | Agent Agent Delivery |
| 1. Article Addressed to:    Beth Cagle Webster   P.O. Box 282   Lake Orion, Michigan 48361   | D. Is delivery address different from item 1? If YES, enter delivery address below:  | Yes No               |
| 9590 9403 0589 5183 8933 70<br>2. Artic 7013 1710 0001 121   | □ Adult Signature □ Registe □ Adult Signature Restricted Delivery □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery □ Signature | Receipt for          |
| PS Form 3811; April 2015 PS N 1500 000 9053  | <del></del>  | Return Receipt       |

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| 1335    |   | D MAIL REC<br>Only; No Insurance C                          |                               |
|---------|---|---|-------------------------------|
| 1,2,1,1 | OFF   | FICIAL  | USE                           |
| i       | Postage<br>Ćonitied Fee                           | \$  |                               |
| 0007    | Return Receipt Fee<br>(Endorsement Required)      |   | Postmark<br>Here              |
| 1710    | Restricted Delivery Foo<br>(Endorsement Required) |   |                               |
| {       | Total Postage & Fees                              | \$  |                               |
| 7013    |   | Robert J. Bowen<br>19137 Cantrell Road<br>Linwood, KS 66052 |                               |
|         | PS Form 3800, August 2                            | 2006  | See Reverse for Instructions! |

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| الغابساندسيدر هميسيدد. ورواد<br>مجرد |   |  | <u> </u>   |
|--------------------------------------|---|--|--|
| 2000 A                               | 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:  Robert J. Bowen 19137 Cantroll Road Linwood, KS 66052 | COMPLETE THIS SECTION ON  A. Signature  X  B. Received by (Printed Name)  D. Is delivery address different from If YES, enter delivery address in  | Agent Agent Addressee  C. Date of Delivery  The content of Delivery  The content of Delivery  The content of Delivery  |
|                                      | 9590 9401 0184 5234 5015 38<br>2. A 7013 1710 0001 1211   | 3. Service Type  Adult Signature  Adult Signature Restricted Delivery  Certified Mail®  Certified Mail® Restricted Delivery  Collect on Delivery  Collect on Delivery  stricted Delivery | □ Priority Mail Express® □ Registered Mail™ □ Registered Mail Restricted Delivery □ Return Receipt for Merchandise □ Signature Confirmation ™ □ Signature Confirmation Restricted Delivery |
|                                      | PS Form 3811, July 2015 PSN 7530-02-000-9053  | ΄ Ε  | Pomestic Return Receipt 👍  |

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# USPS Tracking®



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**Text Updates** 

**Email Updates** 

Available Actions

Get Easy Tracking Updates : Sign up for My USPS.

Tracking Number: 70131710000112111236

#### **Product & Tracking Information**

Postal Product:

Features:

Certified Mail"

Recipient Available)

VENTURA, CA 93004

We attempted to deliver your item at 3:12 pm on April 5, 2016 in VENTURA, CA 93004 and a notice was left because an authorized recipient was not available. You may arrange redelivery by using the Schedule a Redelivery feature on this page or calling 800-ASK-USPS, or may pick up the item at the Post Office indicated on the notice. If this item is unclaimed by April 20, 2016 then it will be returned to

April 4, 2016, 11:37 pm

April 5, 2016 , 3:12 pm

Departed USPS Facility

**GOLETA, CA 93199** 

April 4, 2016 . 7:46 am

Arrived at USPS Facility

GOLETA, CA 93199

April 3, 2016, 3:19 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

April 2, 2016, 10:09 pm

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

### Track Another Package

Tracking (or receipt) number

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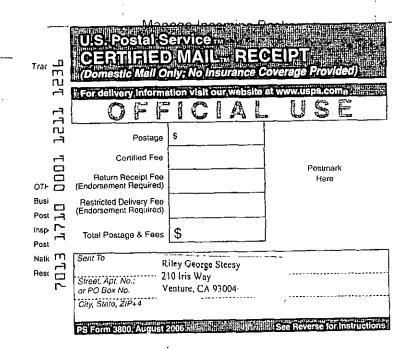
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Tracking Number: 70131710000112111434

### Product & Tracking Information

Postal Product: \*

Features:

Certified Mail™

#### Available Actions

Text Updates

Email Updates

April 27, 2016 , 1:07 pm

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

Your dem arrived at our USPS facility in ALBUQUEROUE, NM 87101 on April 27, 2016 at 1.07 pm. The dem is currently in transit to the destination,

April 25, 2016, 1:28 am

Departed USPS Facility

SALT LAKE CITY, UT 84199

April 24, 2016, 9:15 am

Arrived at USPS Facility

SALT LAKE CITY, UT 84199

April 22, 2016, 7:06 pm

Departed USPS Facility

RENO, NV 89510

April 19, 2016 , 11:37 am

Unclaimed/Max Hold Time Expired

RENO, NV 89510

April 5, 2016 , 10:41 am

Notice Left (No Authorized

Recipient Available)

RENO. NV 89509

April 5, 2016, 8:08 am

Arrived at Unit

RENO, NV 89510

April 4, 2016, 11:46 am

Arrived at USPS Facility

RENO, NV 89510

April 3, 2016 , 3:19 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

April 2, 2016, 9:26 pm

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

## Track Another Package

Tracking (or receipt) number

| For delivery informa                           | ition | visit` | 111 | webs | lte    | at www.usps.come |
|--|-------|--------|-----|------|--------|------------------|
| OFF  | i i   | C      |     | A    | r vera | USE              |
| Postage  | \$    |        |     |      |        |                  |
| Certified Fee                                  |       |        |     |      |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |       |        |     |      |        | Postmark<br>Here |
| Restricted Delivery Fee (Endorsement Required) |       |        |     |      |        |                  |
| Total Postage & Fees                           | \$    |        |     |      |        |                  |

1710 7013

Wesley Everett Stuessi

Street, Apt. No.; Apartment F5 3300 Kauai Court or PO Box No. City, State, ZIP+., Reno. NV 89509

https://tools.usps.com/go/TrackConfirmAction.action?

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Tracking Number: 70131710000112111458

### **Product & Tracking Information**

Postal Product:

Features:

Certified Mail™

#### Available Actions

Text Updates

Email Updates

April 27, 2016 , 1:06 pm

Departed USPS Facility

NEW YORK, NY 10199

Your item departed our USPS facility in NEW YORK, NY 10199 on April 27, 2016 at 1 06 pm. The item is currently in transit to the destination.

April 21, 2016, 4:26 pm

Unclaimed/Max Hold Time Expired

NEW YORK, NY 10024

April 5, 2016, 2:56 pm

Notice Left (No Authorized Recipient Available)

NEW YORK, NY 10024

April 4, 2016, 10:54 am

Arrived at USPS Facility

NEW YORK, NY 10199

April 3, 2016 , 3:19 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

April 2, 2016 , 9:14 pm

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

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Tracking (or receipt) number

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|           | <u></u>  | Managa                      | Incomina      | r Packar      | 300                                     |
|-----------|--|-----------------------------|---------------|---------------|---|
| 1458      | U.S. Postal S<br>CERTIFIEL<br>(Domestic Mail O | ervice<br>MAIL              |               | IPT.          | vided)                                  |
| $\exists$ | #For delivery informs                          | ition visit o               | ır website at | www.usps.c    | om <sub>e</sub>                         |
| 1211      | OFF  |                             | . 1/ **       |               | Here<br>There                           |
| 딘         | Postage  | \$                          |               |               |   |
|           | Certified Fee                                  |                             |               |               |   |
| 1000      | Return Receipt Fee<br>(Endorsement Required)   |                             | -             | Postm<br>Her  | -                                       |
| 1710      | Restricted Delivery Fee (Endorsement Required) |                             |               |               |   |
| 7         | Total Postage & Fees                           | \$                          |               | _             |   |
| m         | Sent To  | Kevin Adam:<br>Apartment G  |               | <u></u>       |   |
| 7013      | Street, Apt. No.;<br>or PO Box No.             | 221 West 78t<br>New York, N | th            |               | *************************************** |
|           | City, State, ZIP+4                             |                             |               |               |   |
|           | PS Form 3800, August 2                         | 006    44    400            |               | ee Reverse to | or instructions                         |

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Available Actions

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Tracking Number: 70131710000112111465

Your item was returned to the sender on April 25, 2016 at 3:32 pm in SEATTLE, WA 98155 because it was not claimed by the addressee once the item reached its maximum hold time at the post office.

### Product & Tracking Information

Postal Product:

Features: Certified Mail\*

#### Text Updates

Email Updates

April 25, 2016 , 3:32 pm

Unclaimed/Max Hold Time Expired

SEATTLE, WA 98155

Your item was returned to the sender on April 25, 2016 at 3:32 pm in SEATTLE, WA 98155 because it was not obtained by the addressee once the item reached its maximum hold time at the post office.

April 5, 2016 , 1:41 pm

Notice Left (No Authorized Recipient Available)

SEATTLE, WA 98155

April 5, 2016 , 4:58 em

Arrived at Unit

SEATTLE, WA 98155

April 4, 2016 , 6:00 pm

Departed USPS Facility

SEATTLE, WA 98168

April 4, 2016 , 10:28 am

Arrived at USPS Facility

SEATTLE, WA 98168

April 3, 2016 , 3:19 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

April 2, 2016 , 8:58 pm

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

### Track Another Package

Tracking (or receipt) number

|      | 1465   | U.S. Postal S<br>GERIIIFIEL<br>(Domestic Mail O                         |       | IAI<br>No I               |      | ı ji |       | EIPT<br>pverage Provided)         |
|------|--------|---|-------|---------------------------|------|------|-------|-----------------------------------|
| Trac | 1211 1 | For delivery inform   | \$    | C                         |      |      |       |                                   |
|      | 1000   | Certified Fee<br>Return Receipt Fee<br>(Endorsoment Required)           |       |                           |      |      |       | Postmark<br>Hore                  |
|      | 1710   | Restricted Delivery Fen<br>(Endorsement Required)  Total Postago & Fees | \$    |                           |      |      |       |                                   |
|      | 7013   |   | 19219 | Davis<br>35th I<br>Forest | Plac |      | 98155 | 5<br>■See Reverse for Instruction |

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USPS Mobile Customer Service English Register / Sign In **■USPS.COM**® USPS Tracking® Customer Service Have questions? We're here to help. Get Easy Tracking Updates > Sign up for My USPS. Tracking Number: 70131710000112111205 Updated Delivery Day: Wednesday, April 13, 2016 **Product & Tracking Information** Available Actions Postal Product; Features: Text Updates Certified Mail™ Email Updates April 13, 2016, 11:37 am SANTA FE, NM 87501 Your item was delivered at 11:37 am on April 13, 2016 in SANTA FE, NM 87501. Available for Pickup SANTA FE, NM 87501 April 13, 2016, 7:28 am April 13, 2016, 7:27 am Arrived at Unit SANTA FE, NM 87501 April 8, 2016 , 11:40 pm Departed USPS Facility KANSAS CITY, MO 64121 April 4, 2016, 3.09 pm Arrived at USPS Facility KANSAS CITY, MO 64121 Track Another Package Manage Incoming Packages Tracking (or receipt) number Track all your packages from a dashboard No tracking numbers necessary Track It L) щ 1211 HELPFUL LINKS ON ABOUT.USPS.COM About USPS Home Contact Us 1000 Certified Fee Site Index Postmark Return Receipt Fee USPS Service Updates Here (Endorsement Required) Forms & Publications Restricted Delivery Fee 1710 Government Services Careers Total Postage & Fee Karl F. Myers, Individually and

m

701

Street, Apt. No.;

or PO Box No. City, State, ZIP+4 as Guardian for Frank Myers

PS Form 3800, August 2006 See Reverse for Instructions

6245 North London Avenue

Kansas City, MO 64151

Apartment E

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#### 277 0001 Certified Fee Postmark Return Receipt Fee Here (Endorsement Required) Restricted Delivery Fee OTH 🗀 (Endorsement Required) Total Postage & Fees Pos Insp Valerie J. Hoffman Pos 5330 West Ridge Road 20 Street, Apt. No.; Nati Kansas City, KS 64108 or PO Box No. Res City, State, ZIP+4

Track Another Package

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April 4, 2016, 3:09 pm

Tracking (or receipt) number

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KANSAS CITY, MO 64121

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USPS Mobile Register / Sign In English Customer Service **■USPS.COM**° Customer Service > USPS Tracking® Have questions? We're here to help. Get Easy Tracking Updates > Sign up for My USPS. Tracking Number: 70131710000112111311 Available Actions **Product & Tracking Information** Postal Product: Features: Text Updates Certified Mail" Email Updates LAKESIDE, CA 92040 April 6, 2016, 11:58 am Delivered Your item was delivered at 11:58 ani on April 6, 2016 in LAKESIDE, CA 92040. SAN DIEGO, CA 92199 Departed USPS Facility April 5, 2016 , 9:19 pm SAN DIEGO, CA 92199 Arrived at USPS Facility April 5, 2016, 2:03 pm Track Another Package Tracking (or receipt) number Postage 000 Postmark Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) оπ ON ABOUT.USPS.COM HELPFUL LINKS About USPS Home Bus 🗀 Total Postage & Fees Contact Us Pos Newsroom Site Index m Sent To USPS Service Updates Insı FAQs Daniel W. Gillespie Pot 🗀 9483 Garden Knoll Way Forms & Publications Street, Apt. No.; Lakeside, CA 92040 Nat or PO Box No. Government Services City, State, ZIP+4 Re: Careers

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## USPS Tracking®



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Tracking Number: 70131710000112111410

Updated Delivery Day: Wednesday, April 6, 2016

#### **Product & Tracking Information**

Postal Product:

Certified Mail™

### Available Actions

Text Updates

Email Updates

April 19, 2016, 12:44 pm

Delivered, Individual Picked Up at Post Office

TULSA, OK 74135

Your nem was picked up at the post effice at 12:44 cm on April 19, 2016 in TULSA, OK 74135.

April 6, 2016, 2:22 pm

Notice Left (No Authorized Recipient Available)

TULSA, OK 74135

April 6, 2016 , 8:44 am

Out for Delivery

TULSA, OK 74135

April 6, 2016 , 7:44 am

Sorting Complete

TULSA, OK 74135

April 5, 2016, 9:58 am

Arrived at Unit

TULSA, OK 74135

April 5, 2016, 12:49 am

Departed USPS Facility

TULSA, OK 74141

April 4, 2016 , 9:24 am

Arrived at USPS Facility

TULSA, OK 74141

April 3, 2016, 3:19 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

April 2, 2016, 10:09 pm

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

### Track Another Package

Tracking (or receipt) number

14.3.D  $\neg$ 1211 Postage 1000 Certified Fee Postmark Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 1710 Total Postage & Fees m Sent To Delbert Joseph Fitzgerald Estate 701

c/o Richard Fitzgerald Street, Apt. No.; 4806 East 37th Place or PO Box No. Tulsa, OK 74135

PS Form 3800. August 2006 to the commence of t

City, State, ZIP+4

https://tools.usps.com/go/TrackConfirmAction.a

| ISPS.com® - USPS Tr   |  | Regis   |            | RB265924606US  |
|---|--|---|------------|--|
| English Customer Serv   | vice USPS Mobile   |   | -          | tage \$ 52.21 Extra Services & Fees (1500)   |
|   |  | To Be Completed<br>By Post Office   |            | egistered Mail \$\$13.95   |
|   |  |   | (h         | eturn Receipt Signature Confirmation Restricted Deliver Signature Confirmation Restricted Restri |
|   |  | le Coл<br>Post (  | i te       | eturn Receipt \$0.00   Total Postage & Rees  |
| USPS Tracking®  |  | ToB   | C          | tomer Must Declare Received by Threestic Insurance up to \$50.000  |
|   |  |   | Full<br>\$ | Value \$0.00 ptd/02/2016 Processed upon the declared value 104/02/2016 Insurance up to \$50,000 is includenthased upon the declared value. International Indemnity is limited. (See Reverse).  |
|   |  |   |            | SANTACE FINN 87501L USE  |
|   |  | ped   |            |  |
| Tracking Number: RB265924606US  |  | tomer<br>nt or Ty   | FROM       | James Bruce  |
|   |  | Completed By Customer<br>(Please Print)<br>Must Be in Balippint or Typed    | \ <u>\</u> | P.O. Box 1056 Statuta Fe, New Mexico 87504   |
|   |  | Be Completed By Customer<br>(Please Print)<br>les Must Be in Balipoint or T | -          |  |
|   |  | e Comp<br>(PJs<br>Must  |            | Ellen Stuessi Larken  Geisenbergstr 18   |
| Product & Trackin   | g Informatic   | Entr To   |            | 66892 Bruchmuhlbach  |
| Postal Product:<br>First-Class Package International Sc   | Features:  |   | L.         | Federal Republic of Germany  |
| First Class Factage International St  |  | April 20  | 015,       | 806, Registered Mail Receipt Copy 1 - Customer<br>PSN 7530-02-000-9051 - (See Information on Reverse)  |
| PATEROMEN STATES  | TETRE VET VET VET VET VET VET VET VET VET VE                           | F   | •          | mestic delivery information, visit our website at www.usps.com   |
| April 27, 2016 , 2:46 pm  | Delivered  |   |            | GERMANY  |
| Your item was delivered in GEI  | RMANY at 2:46 pm on Api  | nl 27, 2016   |            |  |
| April 26, 2016 , 9:18 am  | Customs clearance processing complet                                   |   |            | GERMANY  |
| April 23, 2016 , 12:51 pm   | Customs Clearance  | 2   |            | GERMANY  |
| April 23, 2016 , 12:51 pm   | Processed Through  | Facility  |            | GERMANY  |
| , April 19, 2016 , 4;57 pm  | Departed   |   |            | Fort Worth, UNITED STATES  |
| April 19, 2016 , 12:24 am   | Oeparted   |   |            | Los Angeles, UNITED STATES .   |
| April 7, 2016, 9:15 pm Processed Through F  |  | n Facility  |            | ISC LOS ANGELES CA (USPS)  |
|   | m Arrived at Facility  |   |            | ISC LOS ANGELES CA (USPS)  |
| April 7, 2016 , 9:14 pm   | Arrived at Facility  |   |            |  |
| April 7, 2016 , 9:14 pm  April 7, 2016 , 12:51 am   | Arrived at Facility  Arrived at USPS F                                 | acility   |            | PHOENIX, AZ 85026  |
|   |  |   |            | PHOENIX, AZ 85026  ALBUQUERQUE, NM 87101   |
| April 7, 2016 , 12;51 am  | Arrived at USPS F  | acility   |            |  |
| April 7, 2016 , 12;51 am April 5, 2016 , 11;41 pm   | Arrived at USPS F  | acility<br>acility  |            | ALBUQUERQUE, NM 87101  |
| April 7, 2016 , 12:51 am<br>April 5, 2016 , 11:41 pm<br>April 5, 2016 , 9:42 pm   | Arrived at USPS F Departed USPS F Arrived at USPS F                    | acility<br>acility  |            | ALBUQUERQUE, NM 87101 ALBUQUERQUE, NM 87101  |
| April 7, 2016 , 12:51 am<br>April 5, 2016 , 11:41 pm<br>April 5, 2016 , 9:42 pm<br>April 2, 2016 , 4:08 pm                    | Arrived at USPS F Departed USPS F Arrived at USPS F Departed Post Offi | acility<br>acility  |            | ALBUQUEROUE, NM 87101 ALBUQUERQUE, NM 87101 SANTA FE, NM 87501   |
| April 7, 2016 , 12:51 am  April 5, 2016 , 11:41 pm  April 5, 2016 , 9:42 pm  April 2, 2016 , 4:08 pm  April 2, 2016 , 1:59 pm | Arrived at USPS For Departed USPS For Departed Post Offin Acceptance   | acility<br>acility  |            | ALBUQUERQUE, NM 87101  ALBUQUERQUE, NM 87101  SANTA FE, NM 87501  SANTA FE, NM 87501   |
| April 7, 2016 , 12:51 am<br>April 5, 2016 , 11:41 pm<br>April 5, 2016 , 9:42 pm<br>April 2, 2016 , 4:08 pm                    | Arrived at USPS For Departed USPS For Departed Post Offin Acceptance   | acility<br>acility  |            | ALBUQUERQUE, NM 87101  ALBUQUERQUE, NM 87101  SANTA FE, NM 87501  SANTA FE, NM 87501   |