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

IN THE MATTER OF THE HEARING CALLED BY THE OIL CONSERVATION DIVISION FOR THE PURPOSE OF CONSIDERING:

CASE NO. 10235

APPLICATION OF STRATA ENERGY RESOURCES CORPORATION FOR COMPULSORY POOLING, LEA COUNTY, NEW MEXICO

CERTIFICATE OF MAILING AND COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054) I hereby certify that on January 16, 1991, I caused to be mailed by certified mail return-receipt requested notice of this hearing and a copy of the application for the above referenced case along with the cover letter, at least twenty days prior to the hearing set for February 7, 1991, to the parties shown in the application as evidenced by the attached copies of return receipt cards.

n duhee aren Aubrey

SUBSCRIBED AND SWORN to before me this $\frac{157}{2}$ day of February, 1991.

Notary Public

My Commission Expires:

7-6-91

BEFORE EXAMINER STOGNER

Oil Conservation Division

Strata Exhibit No. /

Case No. 10235

and any hope additional	i i i i and complete itoms
SENDER: Complete Items I and 2 when additional s	ervices are desired, and complete items
3 and 4. Put your address in the "RETURN TO" Space on the reverse : put your address in the "RETURN TO" Space on the reverse :	side. Failure to do this will prevent this card
Put your address in the "RETURN TO" Space on the reverse a from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following services	you the name of the person delivered to and
the date of delivery. For additional fees the following service.	
and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's ad	dress. 2. C Restricted Delivery
(Extra charge)	
3	4. Article Number
Donald RECEIVED JAN 29	199107101010101019
Donald Rerring 0 5777 29	Type of Service:
Olney, TX 76374	
1,, ,00,4	
	Certified COD
	Express Mail for Merchandise
and the second	Always obtain signature of addressee
The second of the	or agent and DATE DELIVERED.
KI SPONGLOMUTOULTL	
5. Signature – Addressee	8. Addressee's Address (ONLY if requested and fee paid)
x	requested and see paid
	4 1
6. Signature – Agent	
X tox Horver	4
7. Date of Delivery	
TAN 23 1991 //	
Unit Arte U	5 DOMESTIC RETURN RECEIPT
PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-81	5 DOMESTIC REFORM RECEIPT
SENDER: Complete items 1 and 2 when additional	services are desired, and complete items
3 and 4. Put your address in the "RETURN TO" Space on the reverse	e side. Failure to do this will prevent this card
from being returned to you. The return receipt fee will provid	e you the name of the person delivered to and
the date of delivery. For additional fees the following servic	es are available. Consult postmaster for fees
and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's a	ddress. 2.
(Extra charge)	(Extra charge)
	4. Article Number
Texaco, USA	
•	Plallelololalle
Heritage Center	Type of Service:
Midland, TX 79702	Registered Insured
	Certified COD
	Express Mail Return Receipt
	Always obtain signature of addressee
RE: Strada Como. Pool(CHC)	
KE: Stroido Comp. Pool CHC	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
	Always obtain signature of addressee or agent and DATE DELIVERED.
x	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
X 6. Signature – Agent	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resultied and fee paid)
X 6. Signature – Agent	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resultied and fee paid)
x 6. Signature – Agent x R	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
x 6. Signature – Agent x R	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resultied and fee paid)
x 6. Signature – Agent x R 7. Date of Delivery JAN 2 2 1991	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991
x 6. Signature – Agent x R	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991
x 6. Signature – Agent x R 7. Date of Delivery JAN 2 2 1991	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991
x 6. Signature – Agent x R 7. Date of Delivery JAN 2 2 1991	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991
X 6. Signature – Agent X 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT
X 6. Signature – Agent X 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT
X 6. Signature – Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition 3 and 4.	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 15 DOMESTIC RETURN RECEIPT nal services are desired, and complete items
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reversion fee will provide the rever	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 15 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the prevent this card
 K 6. Signature – Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reverting returned to you. The return receipt fee will provide the following service the date of delivery. For additional fees the following service the date of delivery. 	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 15 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the prevent this card
X 6. Signature – Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • Put your address in the "RETURN TO" Space on the reversion being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested.	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if rewrited and fee paid) CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees
 K 6. Signature – Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reverting returned to you. The return receipt fee will provide the following service the date of delivery. For additional fees the following service the date of delivery. 	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if rewrited and fee paid) CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 ★ U.S.G.P.O. 1989-238-8 ● SENDER: Complete items 1 and 2 when addition Your address in the "RETURN TO" Space on the revertive from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested. 1. □ Show to whom delivered, date, and addressee's	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and vices are available. Consult postmaster for fees address. 2.
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 ★ U.S.G.P.O. 1989-238-8 ● SENDER: Complete items 1 and 2 when addition Your address in the "RETURN TO" Space on the revertive from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested. 1. □ Show to whom delivered, date, and addressee's	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
X 6. Signature – Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • Jan 2 2 1991 • U.S.G.P.O. 1989-238-8 • U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • Jan 2 2 1991 • U.S.G.P.O. 1989-238-8 • O.S.G.P.O. 1989-	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if rewrited and fee paid) CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reversion being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following servand check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number
X 6. Signature – Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • Jan 2 2 1991 • U.S.G.P.O. 1989-238-8 • U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • Jan 2 2 1991 • U.S.G.P.O. 1989-238-8 • O.S.G.P.O. 1989-	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT nal services are desired, and complete items rse side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLIC COLUMENT RECEIVED JAN 1001
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 * U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reverse from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 TS DOMESTIC RETURN RECEIPT The DOMESTIC RETURN RECEIPT The Services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: RECEIVED JAN 29]
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reversion being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following servand check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT nal services are desired, and complete items rse side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLIC COLUMENT RECEIVED JAN 1001
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 * U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reverse from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewrited and fee paid) ECEIVED JAN 24 1991 TS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT Address. 2. Restricted Delivery (Extra charge) Article Number POOLOCOIIS RECEIVED JAN 24 1991 Article Number POOLOCOIIS RECEIVED JAN 24 1991 POOLOCOIIS RECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 * U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reverse from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewrited and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT address are desired, and complete items rse side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: RECEIVED JAN Certified Express Mail Return Receipt for Merchandise Always obtain signature of addressee
X 6. Signature - Agent X Image: Second State of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the rever from being returned to you. The return receipt fee will provide the date of delivery. For additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 BC: SHEOLOGY	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewrited and fee paid) ECEIVED JAN 24 1991 TS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT CEIVED JAN 24 1991 TS DOMESTIC RETURN RECEIPT CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT CEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT
X 6. Signature - Agent X R 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 * U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reverse from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT To DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT address. 2. Restricted Delivery (Extra charge) Article Number Defet fee JA Type of Service: RECEIVED JAN Certified Express Mail Return Receipt for Merchandise Always obtain signature of addressee a gent and DATE DELIVERED. 8. Addressee's Address (ONLY if
X 6. Signature - Agent X Image: Second State of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the rever from being returned to you. The return receipt fee will provide the date of delivery. For additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 BC: SHEOLOGY	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewrited and fee paid) ECEIVED JAN 2 4 1991 TS DOMESTIC RETURN RECEIPT nal services are desired, and complete items rese side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOCO 113 Type of Service: RECEMPTED JA Insured Certified DATE DELIVERED.
 x 6. Signature - Agent x Agent - Agent x Agent - Agent JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • Address in the "RETURN TO" Space on the reverse from being returned to you. The return receipt fee will provide the date of delivery. For additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 BC: Step Oppone (Complete) 5. Signature - Addressee Mary Mary Mary 	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT al services are desired, and complete items rse side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: RECEMPTED JAN 1000 1991 Express Mail Return Receipt for Merchandise Always obtain signature of addressee a gent and DATE DELIVERED. 8. Addressee's Address (ONLY if
 X 6. Signature – Agent X 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reversion being returned to you. The return receipt fee will provide the date of delivery. For additional service(s) requested. 1. Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 Signature – Addressee Mary Lou H. Kinser 6. Signature – Addressee 	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT al services are desired, and complete items rse side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: RECEMPTED JAN 1000 1991 Express Mail Return Receipt for Merchandise Always obtain signature of addressee a gent and DATE DELIVERED. 8. Addressee's Address (ONLY if
 x 6. Signature - Agent x Agent - Agent x Agent - Agent JAN 2 2 1991 PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-8 • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • SENDER: Complete items 1 and 2 when addition • Address in the "RETURN TO" Space on the reverse from being returned to you. The return receipt fee will provide the date of delivery. For additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 BC: Step Oppone (Complete) 5. Signature - Addressee Mary Mary Mary 	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT To DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT address. 2. Restricted Delivery (Extra charge) Article Number Defet fee JA Type of Service: RECEIVED JAN Certified Express Mail Return Receipt for Merchandise Always obtain signature of addressee a gent and DATE DELIVERED. 8. Addressee's Address (ONLY if
 X 6. Signature – Agent X 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reversion being returned to you. The return receipt fee will provide the date of delivery. For additional service(s) requested. 1. Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 Signature – Addressee Mary Lou H. Kinser 6. Signature – Addressee 	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT al services are desired, and complete items rse side. Failure to do this will prevent this card ide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: RECEMPTED JAN 1000 1991 Express Mail Return Receipt for Merchandise Always obtain signature of addressee a gent and DATE DELIVERED. 8. Addressee's Address (ONLY if
 x 6. Signature - Agent x 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the rever from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following servand check box(es) for additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 Signature - Addressee 6. Signature - Addressee 6. Signature - Addressee 	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if rewined and fee paid) ECEIVED JAN 24 1991 IS DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT To DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT address. 2. Restricted Delivery (Extra charge) Article Number Defet fee JA Type of Service: RECEIVED JAN Certified Express Mail Return Receipt for Merchandise Always obtain signature of addressee a gent and DATE DELIVERED. 8. Addressee's Address (ONLY if
 x 6. Signature - Agent x 7. Date of Delivery JAN 2 2 1991 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8 SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the rever from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service and check box(es) for additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's (Extra charge) Mary Lou H. Kinser Rt 1, Box 9A Newcastle, TX 76372 Kc. Steppender TX 76372 5. Signature - Addressee Mary Lou H. Kinser 6. Signature - Addressee 7. Date of Delivery A. Jote of Delivery 	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if resulted and fee paid) ECEIVED JAN 24 1991 DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT DOMESTIC RETURN RECEIPT CERVICES are desired, and complete items rse side. Failure to do this will prevent this card dide you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Delecoloce 113 Type of Service: DELIVED JAN 29] Express Mail Return Receipt for Merchandise Always obtain signature of addressee agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid)

3. January 2. Status 1: Mar 1987 UNIT D'' Space on the reverse side. Falvare to do this will prevent this card that decide and decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster for frees that are draged and the decides are available. Consult postmaster of address are available. Consult postmaster for frees that are draged and for post and decides are available. Consult postmaster for address are available. Consult postmaster for frees that are draged and for post and decides are available. Consult postmaster for frees that are draged and for post and decides are available. Consult post are draged and for post and decides are available. Consult postmaster for frees that are draged are decides are available. Consult postmaster for frees are desided. and complete items and address are available. Consult postmaster for frees are available. Consult postmaster for frees are desided. and complete items are decides are available. Consult postmaster for frees are desided. and complete items are draged are available. Consult p	SENDER: Complete items 1 and 2 when additiona	a services are desired, and complete items
Tom being returned to you. The return receipt fee will provide you the name of the person delivered to and under the delivered in and addressee's address.	• 3 and 4.	
and direct boxies for additional services and addresses is address. 2	from being returned to you. The return receipt fee will provide	te you the name of the person delivered to and
1. Show to whom delivered, date, and addressee's address. 2. Bestricted Delivery Jane B. Johnson Article Number Jane B. Johnson Article Number C/O BJ'S Pawn Shop Article Number 122 Ferguson Village Article Number Dallas, TX 75228 Burne Conjection Signature - Addressee Burne Conjection 6. Signature - Addressee Burne Conjection 7. Ogte of Delivery Burne Conjection 8. Sonder - Agent Burne Conjection 9. Sonder - Agent Conjection 9. Sonder - Agent Burne Conjection 9. Sonder - Agent Burne Conjection 9. Sonder - Agent Burne	and check box(es) for additional service(s) requested.	
Jane B. Johnson Article Number C/O BJ's Pawn Shop 122 Ferguson Village Dallas, TX 75228 Product Structure Signature - Addressee Product Structure Signature - Addressee Receive and Structure Signature - Addressee Receive D JAN 24 1991 Storm 3811, Apr. 1989 #US.G.RO. 1988 238-815 Sender Structure - Addressee DOMESTIC RETURN RECEIPT Sender Structure - Addressee Article Number Storm 3811, Apr. 1989 #US.G.RO. 1988 238-815 Sender Structure - Addressee DOMESTIC RETURN RECEIPT Sender Structure - Addressee Article Number Signature - Addressee	 I. L Show to whom delivered, date, and addressee's a 	
Jane B. Johnson c/o BJ's Pawn Shop 122 Ferguson Village Dallas, TX 75228 X. Signature - Addressee S. Somo 3811, Apr. 1989 state of addressee Sevence - Complete items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are desired. C. Show to whom delivered lies the following services are advalable. Contain to part advalable. Sevence - Addressee Signature - Addre		
c/o BJ'S Pawn Shop 122 Ferguson Village Dallas, TX 75228 Insured Corriger Corriger Repitted Corriger Corriger Repitted Corriger	Jane B. Johnson	DI TILL LA DO
122 Ferguson Village Dallas, TX 75228 <pre></pre>		
Dallas, TX 75228 Construct Signature - Addressee Signature - Addr		
Control of the contr		
Always abtain signature of addresses 5. Signature – Addresses 6. Signature – Addresses 7. Oyste of palylery 8. Form 3811, Apr. 1989 * US.G.P.O. 1989-238-813 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 with or events side. Failure to do this will prevent this card on baing networke to addresses of the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card on baing networke to addresses address. 2. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 with or delivered attra, and addresses address. 3 and 4. us your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card on baing networked to addresses address. Compositie items 1 and 2 when additional services are desired. Gwendol yn B. Thompson 1100 3rd Street Signature – Agdret Burney Addresses Signature – Agdret Corrent 3811, Apr. 1989 • Date of Delivery Signature – Agdret Store of Delivery Corrent 3811, Apr. 1989 • Date of Delivery <td>Dallas, TA /5228</td> <td>Return Receipt</td>	Dallas, TA /5228	Return Receipt
Signature - Addressee or sent and <u>EPE DEUVERED</u> S. Signature - Addressee S. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 2.4 1991 Stopplate - Agent Stopplate - Addressee Stopplate - Complete items 1 and 2 when additional services are desired, and complete items Stopplate - For additional registre for addressee Stopplate - For additional registre for addressee Stopplate - Addressee Signature - Addressee Stopplate items 1	- · · <u>· - · · · · · · · · · · · · · · ·</u>	for Werchandise
5. Signature – Addressee 8. Addressee's Addresse (NULY if requested and fee paid) 6. Signature – Agent 8. Addressee's Addresse (NULY if requested and fee paid) 7. Date of Delivery 9. DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are desired. SENDER: Complete items 1 and 2 when additional services are desired. Gwendol yn B. Thompson 1100 3rd Street Gwendol yn B. Thompson 1100 3rd Street Guendol yn B. Thompson 1100 3rd Street SIgnature – Addressee SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are available. Consult postmate for fees or agent and DATE DELIVERED. Signature – Addressee DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete it	Bistoria Composicia	
6) Signature - Agent RECEIVED JAN 24 1991 7: Date of Delivery RECEIVED JAN 24 1991 7: Date of Delivery BOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 wour address in the "CETURN TO" Space on the reverse side. Failure to do this will prevent this card to check boxish for additional services are desired. and complete items 1 and 2 when additional services are desired. Consult postmaster for faces and check boxish for additional services are desired. Consult postmaster for faces and check boxish for additional services are desired. Consult postmaster for faces and check boxish for additional services are desired. Consult postmaster for faces are addressed in sure consult for additional services are desired. Consult postmaster for faces and addressee or agent and Data E DEVICED. Gwendolyn B. Thompson 1100 3rd Street Cartified Consult for additional face the following services are desired. Consult postmaster for faces or agent and Data E DEVICED. Signature - Addressee Start charge Start charge Start charge Stard	5. Signature – Addressee	
A. Marthand RECEIVED JAIN 24 1331 7. Date of Delivery	X	
A. Marthand RECEIVED JAN 24 1331 7. Date of Delivery	6. Signature – Agent	DEOFINED LAN & 1001
Store of Delivery S Form 3811, Apr. 1989 S Form 3811, Apr. 1989 SENDER: Complete items 1 and 2 when additional services are desired, and complete items and 4. Uyour address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card combany network (for desired or and delivered to and incheck boxish for additional searce/site requested. Sendels for additional searce/site requested. Show to whom delivered. Street (for more searce available. Consult postmaster for fees in delivered to and incheck boxish is provide visual the name of the person delivered to and incheck boxish is gnature or addressee 's address. C restricted Delivery (for more searce) Signature - Addressee Article Number Signature - Adgent Receiver (for more searce) Bestricted Delivery (for mercinal searce) Article Number	x h. M. aplace	RECEIVED JAN 24 1991
SForm 3811, Apr. 1989 +US.G.P.O. 1989-228-015 SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. ut your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card on being return received date, and addressee's address. Sender: Complete items 1 and 2 when additional services are available. Consult postmaster for these prevents of the prevent being return received date, and addressee's address. Sender: Show to whom delivered date, and addressee's address. C. Restricted Delivery (Errar charge) Gwendolyn B. Thompson 1100 3rd Street Article Number Graham, TX 76046 The distance Signature - Addressee Addressee's address (NLY if requested and fee paid) Signature - Addressee Addressee's address (NLY if requested and fee paid) Signature - Addressee Suddense fee will provide you the name of the prevent bis card for being return Receipt (Errar charge) Oate of Delivery address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being return acquire fee will provide you the name of the prevent fee side fee will provide you the name of the prevent fee side fee will provide you the name of the prevent fee side fee side of delivery (Errar charge) Date of Delivery address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being return receiver (Errar charge) Date of Delivery caddress in the "RETURN TO" Space on the reverse side. Fail		
SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. ury our address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being returned to you. The return require for everse side. Failure to do this will prevent this card for the person delivered to and the person delivere	- 11-9/	
SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. ury our address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being returned to you. The return require for everse side. Failure to do this will prevent this card for the person delivered to and the person delivere		
3 and 4. up your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery for additional fees the following services are available. Consult postmaster for fees and check box(es) for additional fees the dedicessee's address. 2. Restricted Delivery (Curra dura dedicessee's address. 2. Restricted Delivery (Curra dura dedicessee's address. 2. Restricted Delivery (Curra dura dedicessee's address. Gwendolyn B. Thompson 1100 3rd Street Type of Service: Insured Condensity Graham, TX 76046 Return Receipt for Merchadise Signature - Addressee Signature - Addressee Signature - Addressee Joint of Delivery Signature - Agent Stack of the following services are address in the "RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT Senders in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being returned to you. The return receipt fee will provide you the name of the person delivery (Eura charge) Signature - Agent Addressee's address. Person delivered to and the date of delivery services are address. Signature - Agent Stack of the person delivered to and the date of delivery services are addressee's address. Person delivery (Eura char	S Form 30 I I, Apr. 1989 * U.S.G.P.O. 1989-238-8	DOMESTIC RETURN RECEIPT
3 and 4. up your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card for being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery for additional fees the following services are available. Consult postmaster for fees in the date of delivery for additional fees the dedicessee's address. Show to whom delivery for additional services are available. Consult postmaster for fees in the definition of the person delivery for addressee's address. Chara charge) Stignature - Addressee Signature - Agent Senders of Delivery for additional services are available. Consult for Merchandise in the reverse side. Failure to do this will prevent this card for the person delivery for Merchandise in the reverse side. Failure to do this will prevent this card for the person delivery for Merchandise in the reverse side. Failure to do this will prevent this card for the person delivery for Merchandise in the reverse side. Failure to do this will prevent this card for the person delivery for Merchandise following services are address. Date of Delivery for additional services are desired, and complete items and 4. Suptable. Complete items 1 and 2 when additional services are desired, and complete items and 4. Suptable box(selver) for definitional services are address. Senders: Complete items 1 and 2 when additional services are desired. Senders: Complete items 1 and 2 when additional services are addite. Consult postin ster for fees for dom box merevices are addite. Cons		an a
3 and 4. Uyour address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card on being returned to you. The return receipt fee will provide you the name of the person delivery for additional sectors in the decives are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors are available. Consult postmaster for fees and check box(es) for additional sectors and check box(es) for additional sectors and check box(es) for additional sectors are available. Consult postmaster for fees and check box	SENDER: Complete items 1 and 2 when additional	services are desired, and complete items
some baing returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional services are available. Consult postmaster for fees and check box(es) for additional services are available. Show to whom delivered, date, and addressee's address. Restricted Delivery (Extra charge) Article Number Cool of Service: Registered Insured Cool of Service: Registered Cool of Service: Registered Insured Cool of Service: Registered Insured Cool of Service: Registered Cool of Service: Registered Cool of Service: Registered Cool of Service: Registered Signature - Addressee Signature - Agent Sender: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Sender: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Sender: Complete items 1 and 2 when additional services are available. Consult postmater for fees ind check box(es) for additional services are available. Consult postmater for fees ind check box(es) for additional services are available. Consult postmater for fees ind check box (es) for additional services are available. Consult postmater for fees ind check box (es) for additional services in the reverse side. Failure to do this will prevent this card more being returned towou. Marchandise indetheck box (bes) for additional services in the	3 and 4.	
and check box(es) for additional services and addressee's address. 2. Restricted Delivery (Extra charge) Cwendolyn B. Thompson 1100 3rd Street Graham, TX 76046 4. Arcicle Number Signature – Addressee 4. Arcicle Number Signature – Addressee 3. Addressee Signature – Agent 8. Addressee Senter – Agent 8. Addressee Senter – Agent 9. Successe Senter – Agent 9. Succes	rom being returned to you. The return receipt fee will provide	you the name of the person delivered to and
Show to whom delivered, ste, and addressee's address. 2. Restricted Delivery (Extra charge) Gwendolyn B. Thompson 4. Article Number Jub ol Street Insured Graham, TX 76046 COD Signature - Addressee Bub old Signature - Ageht Receive old Corr 3811, Apr. 1989 +US.G.P.O. 1989-238-61 SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Sender: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Sender: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Sender: Complete items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are available. Consult postmatter for fees Sender: Complete items 1 and 2 when additional services are desired. Solution services are available. Consult postmatter for fees Sender: Complete items 1 and 2 when additional services are available. Consult postmatter for fees Sender: Complete items 1 and 2 when additional services are available. Consult postmatter for fees </td <td>he date of delivery. For additional fees the following service</td> <td>s are available. Consult postmaster for fees</td>	he date of delivery. For additional fees the following service	s are available. Consult postmaster for fees
Gwendolyn B. Thompson 1100 3rd Street Graham, TX 76046 Ype of Service: Registered Signature - Addressee Jurubly Jurubly Signature - Agent Sender Street Date of Delivery Image: Sender Street Signature - Agent Sender Street Date of Delivery Image: Sender Street Sender Street Sender Street Sender Street Signature - Agent Sender Street Sender Street Sender Street Sender Street Sender Street Signature - Agent Sender Street	. D Show to whom delivered, date, and addressee's ad	
Gwendolyn B. Thompson 1100 3rd Street Graham, TX 76046 Type of Service: Registered Condectantiation Signature - Addressee Always obtain signature of addressee or agent and DATE DELIVERD. Signature - Agent 8. Addresse's Address (ONLY if requested and fee paid) Date of Delivery - 2 2 - 4 Min Porm 3811, Apr. 1989 *US.G.P.O. 1989-238-815 SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are available. Consult postmaster for fees and check box(es) for additional services) requested. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are available. Consult postmaster for fees and check box(es) for additional services) requested. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are available. Consult postmaster for fees and check box(es) for additional services) requested. Domestic additional services are available. Consult postmaster for fees and check box(es) for additional services are available. Consult postmaster for fees and check box(es) for additional services are available. Consult postmaster for fees and check box(es) readditional services are available. Consult	(Extra harge)	
Gwendolyn B. Thompson 1100 3rd street Graham, TX 76046 Insured Insured Certified Insured Insured Weigestered Graham, TX 76046 Insured Certified Insured Cord Signature - Addressee Signature - Agent Always obtain signature of addressee or agent and DATE DELIVERED. Signature - Agent B. Addressee's Address (OALY if requested and fee paid) Date of Delivery I - 7 Z - 9 (Intro- Sand 4. B. Addressee's Address (OALY if requested and fee paid) Stender: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Certified Delivery (Extra charge) Sender: Complete items 1 and 2 when additional services are available. Consult postmaster for fees ind check bokes for additional fees the following services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Check bokes for additional services are available. Consult postmaster for fees in Che	•	\square
Gwendolyn B. Thompson 1100 3rd Street Graham, TX 76046 Always obtain signature of addressee Signature - Addressee Jurus Quark Signature - Addressee Jurus Quark Signature - Agent Registered Barne - Agent Recellivery -727 -727 With Form 3811, Apr. 1989 *US.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 0 moles in etwarse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivery (Extra charge) Senders to whom delivered, date, and addressee's address. 2. Bernice Thompson c/o C.S. Thompson 1406 Al amosa didiconal services's address (ONLY if requested and fee paid) Avgra obtain signature of addressee Signature - Addressee Signature - Addressee Signature - Addressee Set - Thompson c/o C.S. Thompson 1406 Al amosa 0deressee is address (ONLY if requested and fee paid) Signature - Addressee Signature -		
1100 3rd Street Insulation Graham, TX 76046 CoD Signature - Addressee Always obtain signature of addressee Signature - Addressee Always obtain signature of addressee Signature - Agent 8. Addressee's Address (ONLY if requested and fee paid) Signature - Agent RECEIVED JAN 24 1991 Date of Delivery Muther additional services are desired, and complete items 3 and 4. *US.G.P.O. 1989-238-815 SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. The receipt receipt fee will provide you the name of the person deliverd to and he date of delivery. For additional fees the following services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaster for fees ind check bokes for additional services are available. Consult postmaste	Gwendolyn B Thompson	
Graham, TX 76046 Craham, TX 76046 Competition of the content of addressee or agent and DATE DELIVERED. Signature – Addressee Durund M. Schwarz Signature – Agent Signature – Agent Sender Sen	1100 3rd Street	
Image: Standard Stress and Stress Standard Stre		Detum Beasint
Signature - Addressee Jucurd Generation Signature - Agent Generation	Granam, TX 76046	
Signature – Addressee B. Addressee's Address (ONLY if requested and fee paid) Signature – Agent 8. Addressee's Address (ONLY if requested and fee paid) Signature – Agent RECEIVED JAN 24 1991. Date of Delivery Mit -7729 Mit Form 3811, Apr. 1989 +US.G.P.O. 1989-238-815 SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional servicels requested. I. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Etra charge) Bernice Thompson c/o C.S. Thompson 1406 Al amosa Article Number Coch Coch Coch Coch Coch Coch Coch Coch		
Signature - Agent requested and fee paid) Signature - Agent RECEIVED JAN 24 1991. Date of Delivery Mthematical Secondary -72.49 Mthematical Secondary Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are desired, and complete items 3 and 4. SENDER: Complete items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are available. Consult postmaster for fees ind check box(se) for additional service(s) requested. Senders: Drompson c/o CS. Thompson 1406 Al amosa 0dessa, TX 79760 Article Number Signature - Addressee Addressee Second CHO Signature - Addressee 8. Addressee 's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991	K. STRONG-LOMDHOOI(LHC)	
Signature - Agent Signature - Agent Date of Delivery 22-9 Form 3811, Apr. 1989 *US.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card trom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional services are available. Consult postmaster for fees and check boxles for additional services) requested. I. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Alamosa 4 Article Number Odessa, TX 79760 Type of Service: Type of Service: Type of Service: Addressee or agent and DATE DELIVERED. Signature - Addressee 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991		
Date of Delivery Image: Complete items RECEIVED JAN 24 1991. Form 3811, Apr. 1989 +US.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items is and 4. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are desired, and complete items is and 4. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are desired, and complete items is and 4. DOMESTIC RETURN RECEIPT Sender: Complete items 1 and 2 when additional services are available. Consult postmaster for fees ind check box(es) for additional service(s) requested. Consult postmaster for fees ind check box(es) for additional service(s) requested. I. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Alamosa 4. Article Number Cod I. Signature _ Addressee Addressee Sail Cod Signature _ Addressee Signature _ Addressee 8. Addressee's Address (ONLY if requested and fee paid) Signature _ Addressee Signature _ Agent RECEIVED JAN 25 1991	Hurndolyn 13 think in	- Josephan Josephana,
Date of Delivery Ittld Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Domestic RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Domestic RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Domestic RETURN RECEIPT Senderss in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card the date of delivery for additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. I. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Al amosa 0dessa, TX 79760 Article Number Domestrice: Begistered Insured Con Signature _ Addressee Always obtain signature of addressee Signature _ Addressee Addressee 8. Addressee (S Address (ONLY if requested and fee paid) Signature - Agent RECEIVED JAN 25 1991		
Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Sender. Yet your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card no being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional services) requested. I. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson C/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 4 Article Number Insured Signature - Addressee Addressee Shail Beruis er dedressee Beruis er dedressee Signature - Agent Addressee Staddresse (ONLY if requested and fee paid) RECEIVED JAN 25 1991		RECEIVED JAN 24 1991
Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Services are desired, and complete items Sand 4. Out your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card nom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional service(s) requested. . Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Alamosa Article Number Domestrice: Insured Gessa, TX 79760 Article Number Return Receipt for Merchandise Always obtain signature of addressee Addressee Signature - Agent Signature - Agent Mater - Agent RECEIVED JAN 25 1991		
SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Ut your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional service(s) requested. It is show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 4. Article Number It is signature - Addressee Insured Certified Insured of Merchandise Always obtain signature of addressee Addressee (ONLY if requested and fee paid) Received and fee paid. B. Addressee's Address (ONLY if requested and fee paid) Signature - Agent Received and fee paid.	1-11-1 Male	
3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson 4 Article Number C/O C.S. Thompson 1406 Alamosa 0dessa, TX 79760 Registered Isignature Addressee Insured Signature Addressee Addressee Muit C.A. Mompson Addressee 5. Signature Addressee Addressee 6. Signature Addressee Addressee 7. Signature Addressee Received Data 25 1991	Form 3811 , Apr. 1989 * U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, data services, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 4 Article Number Figure Addressee Insured Always obtain signature of addressee COD Signature Addressee Addressee Mut C.A. Monther Addressee Signature Addressee Addressee Signature - Agent ReceiveD JAN 25 1991		-
3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson 4 Article Number C/O C.S. Thompson 4 Article Number 1406 Alamosa CoD Odessa, TX 79760 Registered Always obtain signature of addressee Always obtain signature of addressee 5. Signature Addressee Addressee 6. Signature Addressee Addressee 7. Signature Addressee Received JAN 25 1991	CENDER, Complete items 1 and 2 when additional	convisors are desired, and complete items
Dut your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card rom being returned to you. The return receipt fee will provide you the name of the person delivered to and he date of delivery. For additional service(s) requested. I. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson c/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 4. Article Number Public Consult postmature of addressee 9. Restricted Delivery (Extra charge) August of the second diverse of the second diter second diverse of the second diter second diverse	3 and 4.	
he date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Bernice Thompson 4. Article Number C/O C. S. Thompson 1406 Alamosa Odessa, TX 79760 Registered Isignature _ Addressee Insured Signature _ Addressee Addressee Signature _ Agent Addressee Signature _ Agent ReceiveD JAN 25 1991	Put your address in the "RETURN TO" Space on the reverse	you the name of the person delivered to and
and check box(es) for additional service(s) requested. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge) Article Number Bernice Thompson C/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 Bernice Addressee Insured Begistered Insured Begistered COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee Always obtain signature of addressee Signature _ Addressee Addressee Mm. C.A. Mommon RECEIVED JAN 25 1991	he date of delivery. For additional fees the following service	es are available. Consult postmaster for fees
(Extra charge) (Extra charge) Bernice Thompson 4 Article Number c/o C.S. Thompson 1406 Alamosa 0dessa, TX 79760 Insured Certified CoD Express Mail Return Receipt Always obtain signature of addressee Always obtain signature of addressee Signature - Addressee Addressee Mm. C. Alwongton Received and fee paid) RECEIVED JAN 25 1991	and check box(es) for additional service(s) requested.	
Bernice Thompson c/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 Certified COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . Signature - Addressee MM. C. A. MOMMON S. Signature - Agent MM. C. A. MOMMON S. Signature - Agent S. Signature - Agent		
c/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 Certified CoD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991		4. Article Number
c/o C.S. Thompson 1406 Alamosa Odessa, TX 79760 Certified CoD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991	Bernice Thompson	The local of the
1406 Alamosa Odessa, TX 79760 Always obtain signature of addressee Odessa, TX 79760 Always obtain signature of addressee Always obtain signature of addressee Odessa, TX 79760 Always obtain signature of addressee Begistered	c/o C.S. Thompson	Type of Service:
Odessa, TX 79760 Certified COD Contraction Express Mail Return Receipt for Merchandise Always obtain signature of addressee Always obtain signature of addressee Signature - Addressee Addressee Mu, C. S. Mompson 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991	1406 Alamosa	
Strong Comprod (CHO) Express Mail Netron neception Always obtain signature of addressee or agent and DATE DELIVERED. S. Signature - Addressee S. Signature - Addressee Muse - Addressee S. Signature - Agent RECEIVED JAN 25 1991		Certified COD
Always obtain signature of addressee or agent and DATE DELIVERED. Addressee MM. C. S. Mompson S. Signature – Agent B. Signature – Agent Addressee MM. C. S. Mompson B. Signature – Agent Always obtain signature of addressee or agent and DATE DELIVERED. B. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991		Express Mail Return Receipt for Merchandise
Signature Addressee or agent and DATE DELIVERED. Signature Addressee 8. Addressee's Address (ONLY if requested and fee paid) Signature Agent RECEIVED JAN 25 1991		
<i>Mu. C. S. Shompson</i> 3. Sighature – Agent <i>RECEIVED JAN 25 1991</i>	he Stork (monthal (CUC)	
<i>Mu. C. S. Shompson</i> 3. Sighature – Agent <i>RECEIVED JAN 25 1991</i>	5. Signature - Addressee	
RECEIVED JAN 25 1991	× Mar C A. Thom Mom	
<		BECEIVED IAN SE 100
		1 12 12 12 12 12 12 12 12 12 12 12 12 12
. Date of Delivery 9		
	/. Date of Delivery A. 1	
	しみより	
	Form 3811 , Apr. 1989 * U.S.G.P.O. 1989-238-81	15 DOMESTIC RETURN RECEIPT

	Land 2 when additional	services are desired, and complete items
🛡 3 and 4.		services are desired, and complete items
Put your address in the "RETURN from being returned to you. The re-	TO" Space on the reverse turn receipt fee will provide	side. Failure to do this will prevent this card you the name of the person delivered to and
the date of delivery. For additional	fees the following service	s are available. Consult postmaster for fees
and check box(es) for additional s	ervice(s) requested. Tate, and addressee's ac	dress. 2. 🗆 Restricted Delivery
1. Show to whom delivered, (Extra	(narge)	
		4 Article Number
Charles Herring		Plallalacella
HC 52, Box 202		Type of Service:
Willow Road		Registered Insured
Graford, TX 760	45	Certified COD
		Express Min Return Receipt for Merchandise
		Always obtain signature of addressee
RE Strade Or	motoolCHC	r agent and DATE DELIVERED.
5. Signature – Addressee		8. Addressee's Address WNDX if
x		requested and fee paid
6. Signature - Agent	O D	
× Ghal Her	А П	ECEIVED A R R R
7. Date of Delivery		
PS Form 3811 , Apr. 1989	+U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
5 Form 30 I 1, Apr. 1969	#0.3.G.F. 0. 1969-236-61	

	1 and 2 when additiona	I services are desired, and complete items
• 3 and 4.		e side. Failure to do this will prevent this card
from being returned to you. The r	eturn receint fee will provid	e you the name of the person delivered to and
the date of delivery. For additional and check box(es) for additional	al tees the following servic service(s) requested	es are available. Consult postmaster for fees
1. D Show to whom delivered	d, date, and addressee's a	address. 2. C Restricted Delivery
	ra charge)	(Extra charge)
		Article Number
······································		Plallololol 114
Ronnie Herring		Type of Service:
Box 53		Registered Insured
Newcastle, TX	76372	Certified COD
		Express Mail for Merchandise
		Always obtain signature of addressee
He BROSIG LE	mptoolutic	or agent and <u>DATE DELIVERED</u> .
5. Stature – Addressee	1 1	8. Addressee's Address (ONLY if requested and fee paid)
A Jannie Abrin	my Ul siste	<i>A</i>
6. Signature – Agent	0	PECEIVED JAN 24 199
K JAN Z Z JI		EUEIVED TO E
A. Date of Delivery		
	MM	
PS For 38,12 0491. 1989	* U.S.G.P.O. 1989-238-6	DOMESTIC RETURN RECEIPT
USF.	والمراجع المراجع الم	
SENDER: Complete items 1 3 and 4.	and 2 when additional s	services are desired, and complete items
Put your address in the "RETURN	TO" Space on the reverse :	side. Failure to do this will prevent this card
he date of delivery. For additional	fees the following services	you the name of the person delivered to and are available. Consult postmaster for fees
ind check box(es) for additional se I.	rvice(s) requested.	
	charge)	dress. 2. CRestricted Delivery (<i>Extra charge</i>)
Nelda H. Ar	domage	4. Article Number
P.O. Box 29	uerson /	PLOTLOLOLOLOJA
		Type of Service:
Newcastle,	TX 76372	Registered Insured
_	1	Certified COD
C. I.		Express Mail Return Receipt for Merchandise
		Always obtain signature of addressee
25 Stor. Jr. Chr.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	or agent and DATE DELIVERED.
Signature – Addressee	Producty	8. Addressee's Address (ONLY if
Mun A. 21/01		requested and fee paid)
~	iron	RECEIVED JAN 24 1991
1 AND 49 CLAR		
6 Signature – Agent		RECEIVED
		RECEIVED SALE 2 1
7. Date of Delivery		RECEIVED
	MM	RECEIVED

3 and 4.		
	and 2 when additional	services are desired, and complete items
		e side. Failure to do this will prevent this card
from being returned to you. The retu	rn receipt fee will provide	e you the name of the person delivered to and es are available. Consult postmaster for fees
and check box(es) for additional ser	vice(s) requested	es are available. Consult postmaster for fees
1. Show to whom delivered, d		ddress. 2. 🗆 Restricted Delivery
(Extra d		(Extra charge)
	N N	4. Article Number
Mrs. Leo Pruit		
		RCelleldell
9145 Live Oak	Plan -	Type of Service:
Fontana, CA 923	35 9 \\>	Registered Insured
ronoundy on v=s	LIL A S	
		Express Mail Return Receipt
	\mathbf{N}	for Merchandise
A		Augus obtain signature of addressee
Sistende O	minnet	agent and DATE DELIVERED.
5. Signature - Addressee		8. Addressee's Address (ONLY if
		requested and fee paid)
* mrs. dee X	rue	requested and jet paid)
6. Signature – Agent 1/		
x	1	1 Can &
		- same
7. Date of Delivery	-	
	<u> </u>	
S Form 3811, Apr. 1989	+U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
······	· · · · ·	The second se
	<u> </u>	services a desired, and complete it ms
SENDER: Complete items 1 3 and 4.	and 2 when additional	services are desired, and complete items
- Sanu -, 12 Put your address in the "RFTURN T	O'' Space on the reverse	dide. Failure to do this will nevent this
from being returned to you. The retu	rn receipt fee will provid	e dide. Failure to do this will prevent this band S
the date of delivery. For additional fi	ees the following service	es are available. Consell postmaster for ees
and check box(es) for additional ser	vice(s) requested.	ddress. 2.
Extra c		ddress. 2. L Restricted Delivery (Extra charge)
3. Article Addressed to		Article Number
5. Alticle Addressed to		
Maggie T. G.	Grav	Plollold dollar
		Type of Service:
c/o Burnie R		
H.C. 64 Box	128	
Big Lake, TX		
BIY Lake, IA	70952	Express Mail Return Receipt
	\sim	Always obtain signature of addressee
historia Ca	and Internet	or agent and DATE DELIVERED.
K. MUULU	<u>riproitur</u>	
5. Signature Addressee	d-	8. Addressee's Address (ONLY if
	. YPRECEIVE	B. Addressee's Address (ONLY if requested and fee fruit)
6 Signature Agent		1 JAN 62 / 1991
× Zu.d		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
<u> </u>		
7. Date of Delivery	*U.S.G.P.O. 1989-238-81	The second secon
7. Date of Delivery	*U.S.G.P.O. 1989-238-81	
7. Date of Delivery	*U.S.G.P.O. 1989-238-81	The second secon
7. Date of Delivery - ス 3- 7/ 5 Form 3811, Apr. 1989		5 DOMESTIC RETURN RECEIPT
7. Date of Delivery - ス 3- 7/ S Form 3811, Apr. 1989		5 DOMESTIC RETURN RECEIPT
Form 3811, Apr. 1989	and 2 when additiona	al services are desired, and complete items
5 Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Data and editions in the "RETURN"	and 2 when additiona	al services are desired, and complete items
7. Date of Delivery - 2 3-9/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN	and 2 when additiona TO'' Space on the revers	al services are desired, and complete items see side. Failure to do this will prevent this card
 7. Date of Delivery 2. 3-7/ Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional the date of delivery. For add	and 2 when additiona TO" Space on the revers um receipt fee will provid fees the following servi	al services are desired, and complete items
 Date of Delivery 2 3-7/ Form 3811, Apr. 1989 SENDER: Complete items 1 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional and check box(es) for additional set. 	and 2 when additiona TO" Space on the revers urn receipt fee will provid fees the following servi- arvice(s) requested.	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery
 7. Date of Delivery -2.3-71 Form 3811, Apr. 1989 SENDER: Complete items 1 and 4. Put your address in the "RETURN" from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered. 	and 2 when additiona TO" Space on the revers urn receipt fee will provid fees the following servi- arvice(s) requested.	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees
7. Date of Delivery -23-71 5 Form 3811, Apr. 1989 • SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional and check box (es) for additional (Extra	and 2 when additiona TO'' Space on the revers turn receipt fee will provin fees the following servi ervice(s) requested. date, and addressee's	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery
7. Date of Delivery -23-71 5 Form 3811, Apr. 1989 • SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional and check box(es) for additional and check box (es) for additional (Extra 3	and 2 when additiona TO'' Space on the revers furn receipt fee will provid fees the following servi ervice(s) requested. date, and addressee's charge)	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
7. Date of Delivery -23-7/ 5 Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the ''RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional additional for a	and 2 when additiona TO'' Space on the revers furn receipt fee will provid fees the following servi ervice(s) requested. date, and addressee's charge)	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
7. Date of Delivery -23-71 S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional (Extra 3	and 2 when additiona TO'' Space on the revers furn receipt fee will provid fees the following servi ervice(s) requested. date, and addressee's charge)	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
7. Date of Delivery) - 2 3-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery, For additional and check box(es) for additional additi	and 2 when additiona TO'' Space on the revers um receipt fee will provid fees the following servid revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F-	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery, For additional and check box(es) for additional and the set of delivery. Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F-	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOILOLOLOLOLOL Type of Service: Begistered Insured Certified COD
 7. Date of Delivery -2.3-7/ Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional set and check box(es) for additional set 1. □ Show to whom delivered, (Extra	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOCOLOLOLOL Type of Service: Begistered Insured Certifiet COD Return Receipt
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F-	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOLOLOLOL Type of Service: Begistered Insured Certifiet COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additionals and check box(es) for additionals addi	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: Begistered Insured Certifiet COD Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F-	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOILOLOLOLOL Type of Service: Begistered Insured Certified COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
3 and 4. Put your address in the "RETURN from being returned to you. <u>The ret</u> the date of delivery. For additional set and check box(es) for additional set 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature - Addressee	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOLOLOLOL Type of Service: Begistered Insured Certified COD Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if redersted and fee paid)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery, For additional and check box(es) for additional set. Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature – Addressee X WWWWW	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOLOLOLOL Type of Service: Begistered Insured Certified COD Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if redersted and fee paid)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additionals and check box(es) for additionals additionals add check box(es) for additionals add check box(es) for add check box(es) for additionals add check box(es) for add c	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOIDOLOLOLOL Type of Service: Begistered Insured Certified COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery, For additional and check box(es) for additional set. Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature – Addressee X WWWWW	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOLOLOLOL Type of Service: Begistered Insured Certified COD Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if redersted and fee paid)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature - Addressee X WWWWW 6. Signature - Agent X	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOLOLOLOL Type of Service: Begistered Insured Certified COD Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if redersted and fee paid)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature - Addressee X	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number PLOLOLOLOLOL Type of Service: Begistered Insured Certified COD Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if received and fee paid)
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature - Addressee X MULLING 6. Signature - Agent X	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	al services are desired, and complete items se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address. 2. Restricted Delivery (Extra charge) Article Number Article Number Definition Article Number COD Certifieg Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if reflected and fee paid) RECEIVED JAN 28 1999
7. Date of Delivery -23-7/ S Form 3811, Apr. 1989 SENDER: Complete items 1 3 and 4. Put your address in the "RETURN from being returned to you. The ret the date of delivery. For additional and check box(es) for additional se 1. □ Show to whom delivered, (Extra 3 Iva Thompson G 146 FFM 3168 Bldg 4, Apt F- Raymondsville, 5. Signature - Addressee X MULLING 6. Signature - Agent X	and 2 when additiona TO'' Space on the revers urn receipt fee will provid fees the following servic revice(s) requested. date, and addressee's charge) Grissom	Article Number Article Number Context Consult postmaster for fees Article Number Certifier Article Number Certifier Article Service: Begistered Article Number Certifier Article Service: Begistered Article Service: Begistered Always obtain signature of addressee or agent and DATE DELIVERED. Article Number Always obtain signature of addressee Received and fee paid) ReceiveD JAN 28 1991

from b the dat and ch	eing returne te of delive eck boxles	ed to γou. <u>The re</u> ry. For additiona) for additional s	turn receint fee will	provide you th services are a	ailure to do this will prevent this car e name of the person delivered to an vailable. Consult postmaster for fee 2.
		(Extra	BECEIVED	JA PAL	(Extra charge) Article umber e of Service: Registered Insured Certified COD xpress Mail Return Receipt for Merchandise
x Z	nature -	Addressee <u> <u> <u> </u> <u> </u></u></u>	no tool	8	whit and <u>DATE DELIVERED</u> . Addressee's Address (ONLY if requested and fee paid)
X 7. Da	te of Deliv	very		15	
S Forr	n 3811 ,	Apr. 1989	★U.S.G.P.O. 198	9-238-815	DOMESTIC RETURN RECI
· 1. [J Show te	o whom delivere (Ex	ed, date, and addre tra charge)	g services and d. ssee's addres	the name of the person delivered to available. Consult postmaster for s. 2. Restricted Delivery (<i>Extra charge</i>)
	14613	Spring (Ste, TX	Morrison Oaks Dr. 75180		pe of Service: Registered Insured Certified COD Express Mail Return Receipt for Merchandis
K(Addressee	iomp Pao		ways obtain signature of addressee agent and <u>DATE DELIVERED</u> . Addressee's Address (ONLY if
X 6. S	ignature -	- Agent _{7 L}		<u>_</u>	requested and fee paid)
X (7. D	ate of De	Me K livery - 27,91	usua		RECEIVED JAN 24
PS Fo	./ rm 3811	, Apr. 1989	★ U.S.G.P.O. 1	989-238-815	DOMESTIC RETURN REC
Put from the	3 and 4. your addre being retu date of del	ss in the "RETU urned to you. The livery. For addition (es) for addition to whom deliver	RN TO" Space on th	ne reverse side <u>vill provide you</u> ng services au ed.	(Extitut churge)
		lford He Bend, T	•		Article Number ype of Service: Registered Insured Certified COD Express Mail Return Recein for Merchand
K	ie:St	- Addressee	mpRool	(CHCD	Iways obtain signature of addressee r agent and DATE DELIVERED.
		thank 1	Jenning REC	EIVED	JAchressee' 1 991 ess (ONLY if requested and perpaid)
6.	Signature	- Agent			
x	Signature	elivery	/		

1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being "retained to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.
 1. Show to whom delivered, date, and addressee's address.
 2. Restricted Delivery (Forta charge) 2. C Restricted Delivery (Extra charge) (Extra charge) Article Number ۵ Type of Service: Owana H. Mills Registered Insured Helen Street, Box 471 Certified COD Monahans, TX 79756 Return Receipt Express Mail Always obtain signature of addressee or agent and DATE DELIVERED Addresse 8. Addressee's Address (ONLY if AUA requested and fee paid) Signature - Agent RECEIVED JAN 24 1991 х 7. Date of Delivery PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4 • 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery</u>. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1.
Show to whom delivered, date, and addressee's address. 2. C Restricted Delivery (Extra charge) (Extra charge) Article Number ا ھ 0 01 Type of Service: Billy Wayne McCarty Registered Insured 1632 Oxford Certified 👒 🗆 сор Return Receipt for Merchandise Santa Monica, CA 93454 Express Mail Always obtain signature of addressee Be: or agent and DATE DELIVERED. STRONG Addressee's Address (ONLY if 5. Signature Addressee quested and fee paid X VED JAN 28 1991 6. Signature Agent Х 7. Date of Delivery DOMESTIC RETURN RECEIPT **PS Form 3811,** Apr. 1989 *U.S.G.P.O. 1989-238-815 SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. ■ 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery</u>. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2.
 Restricted Delivery (Extra harge) (Extra charge) Article Number 0 0 Type of Service: L.J. McCarty Registered Insured 🗆 сор 1113 Gateway Circle Certified Return Receipt for Merchandise Express Mail Borger, ТΧ Always obtain signature of addressee or agent and DATE DELIVERED Addressee's Address (ONLY if 8. requested and fee paid) 6 Signature Agent RECEIVED JAN 24 199 Х 7. Date of Delivery PS Form 3811, Apr. 1989 DOMESTIC RETURN RECEIPT +U.S.G.P.O. 1989-238-815

SENDER: Complete items 1 and 2 when addition	mal services are desired and complete items
3 and 4. Put your address in the "RETURN TO" Space on the teve from being returned to you. <u>The return receiptive with root</u> the date of delivery. For additional fees the following en- and check box(es) for additional service(s) requested.	
1. Show to whom delivered, date, and addressee's (Extra charge)	(Extra charge)
Virginia L.T. Tucker South Bend, TX 76081	4. Article Number
KESTRONIA COMO POOL CHK	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature - Addressee	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature – Agent X	RECEIVED JAN 28 1991
7. Date of Delivery	28 1991
PS Form 3811 , Apr. 1989 * U.S.G.P.O. 1989-238	B-815 DOMESTIC RETURN BECEIPT
SENDER: Complete items 1 and 2 when additions 3 and 4. Put your address in the "RETURN TO" Space on the rever- from being returned to you. The return receipt fee will provi the date of delivery. For additional fees the following servi and check box(es) for additional service(s) requested. 1. Show to whom delivered date, and addressee's (Etra charge)	se side. Failure to do this will prevent this card ide you the name of the person delivered to and ices are available. Consult postmaster for fees
	4. Article Number Plate Lelale 133
Bobby Joe McCarty	Type of Service:
7109 Vinewood	
Amarillo, TX 79108	for Merchandise
Ric: Steasla Comp Ford CHK	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature – Addressee	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Asent Miller, D. Mc Carty 7. Date of Delivery	RECEIVED JAN 25 1991
JAN 2 3 1991	
S Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238	-815 DOMESTIC RETURN RECEIPT
SENDER: Complete items 1 and 2 when addition	al convince are depied, and complete items
■ 3 and 4. Put your address in the "RETURN TO" Space on the rever from being returned to you. <u>The return receipt fee will prov</u> the date of delivery. For additional fees the following serv and check box(es) for additional service(s) requested. Show to whom delivered, date, and addressee's 	rse side. Failure to do this will prevent this card ride you the name of the person delivered to and rices are available. Consult postmaster for fees address. 2.
(Extra charge)	Article Number
Holly Jean Morrow	Type of Service:
P.O. Box 307	Certified COD
Newcastel, TX 76372	Always obtain signature of addressee
Kastzada Comp tool CH	or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
x Jalle Lan morrow	requested and fee paid)
6. Sillhatuge -2Wg94t X	RECEIVED JAN 24 1991
P. Date of Delivery	
PS Form 9919 S.pr. 1989 *U.S.G.P.O. 1989-238	B-815 DOMESTIC RETURN RECEIPT

.

• SENDER: Comp 3 and 4.			
2	plete items i and	2 when additional s	ervices are desired, and complete items
- 3 and 4.		• • • • • • • • • • • • • • • • • • •	ide Esilure to do this will prevent this card
Put your address in the from being returned t	to you. The return re	ceipt fee will provide y	you the name of the person delivered to and are available. Consult postmaster for fees
			are available. Consult postmaster for fees
and check box(es) fo	or additional service	(s) requested. , and addressee's add	tress. 2. 🗌 Restricted Delivery
1. LI Show to who	(Extra charge	ge)	(
			4. Article Number
Toborta	T. Hunter	1	Plolophalop 1
			Type of Service:
821 Weld		00100	
Santa Ba	arbara, CA	. 93109	
		,	Boturn Receint
			Express Mail for Merchandise
			Always obtain signature of addressee
T. GL	un Com	S C M C M C	or agent and DATE DELIVERED.
ME HOS	Sur 1		8. Addressee's Address (ONLY if
Signature - Ac	lokessee		REr@EstVEOr AN 28 1991
X HING	lli		28 1991
6. Signature - Ag	gent		
7. Date of Daliver			1
7. Date of BAN	2 3 1004		
			5 DOMESTIC RETURN RECEIPT
PS Form 3811, A	pr. 1989	*U.S.G.P.O. 1989-238-81	5 DOWESTIC REFORM REGENT
:			
		·	<u>-</u> .
SENDER: Co	omplete items 1 a	nd 2 when additiona	I services are desired, and complete items
🗹 3 and 4.			•
from being returne	d to you. The return	space on the revers receipt fee will provid	e side. Failure to do this will prevent this card te you the name of the person delivered to and
the date of deliver	ry. For additional fee	es the following servic	ces are available. Consult postmaster for fees
) for additional servi		
	wnorm delivered, da (Extra ch	te, and addressee's a	address. 2. C Restricted Delivery (Extra charge)
- <u>-</u>			4. Article Number
			140 16 10 do 102
Thel	ma E.H. R	louten	Type of Service:
			Registered
	5 Arcady	005	Certified COD
nali	las, TX 75	1205	
1 0011	-	200	Every Mail Return Receipt
			Express Mail Return Receipt for Merchandise
B. Gra	la Cassal		Express Mail Return Receipt for Merchandise Always obtain signature of addressee
Bé Gra	ta Compif	ba (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
Signature -	Addressee	64 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
bé Gra	Addressee	600 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid)
S Sgnature -		64 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid)
3. Signature – 7 6. Signature – 7		64 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if
5. Signature – 7 K	Agent	64 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid)
3. Signature – 7 6. Signature – 7	Agent	64 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid)
5. Signature – 7 K	Agent	64 (CHC)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid)
5: Sgnature – 7 6: Signature – 7 X 7: Date of Delive	Agent ery	64 (CHC)	 Experience Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u>. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991
5. Signature – 7 K	Agent ery	60 (CHC)	 Experience Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u>. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991
5. Signature – / 6. Signature – / X 7. Date of Delive	Agent ery Apr. 1989	*U.S.G.P.O. 1989-238-8	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 315 DOMESTIC RETURN RECEIPT
6. Signature – / 7. Date of Delive Trm 3811, / SENDER:	Agent ery Apr. 1989	*U.S.G.P.O. 1989-238-8	 Experience Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u>. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991
5. Signature – / 6. Signature – / 7. Date of Delive 7. Date of Delive 7. Date of Delive 7. SENDER: 3 and 4. Put your addre	Agent ery Apr. 1989 Complete items	*U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the rev	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 DOMESTIC RETURN RECEIPT tonal services are desired, and complete iterverse side. Failure to do this will prevent this care
5. Signature – / 6. Signature – / 7. Date of Delive vrm 3811, / SENDER: 3 and 4. Put your addre from being rett	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re	*U.S.G.P.O. 1989-238-8 1 and 2 when additi TO" Space on the re- turn receipt fee will pr	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a
6. Signature – A 7. Date of Deliver wrm 3811, A SENDER: 3 and 4. Put your addre from being retu the date of deliver	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additiona	*U.S.G.P.O. 1989-238-8 1 and 2 when additi TO" Space on the re- turn receipt fee will pr	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a
5. Signature – / 5. Signature – / 6. Signature – / 7. Date of Delive 7. Date of Deliv	Agent ery Apr. 1989 Complete items sess in the "RETURN urned to you. The re livery. For additional ((es) for additional to whom delivered	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr I fees the following sa rervice(s) requested. , date, and addressee	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a arvices are available. Consult postmaster for fee's address. 2. □ Restricted Delivery
5. Signature – 7 6. Signature – 7 7. Date of Delive vrm 3811, 7 SENDER: 3 and 4. Put your addre from being reture the date of del and check box 1. Show 1	Agent ery Apr. 1989 Complete items sess in the "RETURN urned to you. The re livery. For additional ((es) for additional to whom delivered	*U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested.	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge)
 Signature - A Signature - A Signature - A Signature - A To Date of Delive Trm 3811, A Sender: 3 and 4. Put your addres from being return the date of del and check box 1. Show 1 Show 1 	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra-	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the rer turn receipt fee will pr 1 fees the following sc hervice(s) requested. , date, and addressee a charge)	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 Ints DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge)
5. Signature – 7 6. Signature – 7 7. Date of Delive vrm 3811, 7 SENDER: 3 and 4. Put your addres from being returning returning returning returning the date of deliver and check box 1. Show 1 3	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional cless for additional to whom delivered (Extra ena M. T.	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pro- turn receipt fee will	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge)
5. Signature – 7 6. Signature – 7 7. Date of Delive vrm 3811, 7 SENDER: 3 and 4. Put your addres from being returning returning returning returning the date of deliver and check box 1. Show 1 3	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra-	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pro- turn receipt fee will	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 Ints DOMESTIC RETURN RECEIPT tonal services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge)
 Signature - / Signature - /	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional cless for additional to whom delivered (Extra ena M. T.	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr 1 fees the following sc invice(s) requested. , date, and addressee a charge) Hendricks Road	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 B15 DOMESTIC RETURN RECEIPT Fonal services are desired, and complete itervices side. Failure to do this will prevent this ca ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge) PArticle Number Type of Service:
Signature - / × Signature - / × Signature - / × Signature - / × To Date of Delive Trm 3811, / SenDER: Signature - / × Signature - /	Agent ery Apr. 1989 Complete items sss in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra ena M. T. 60 Gibson .O. Box 3	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Experience Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 B15 DOMESTIC RETURN RECEIPT Ional services are desired, and complete itervices are available. Consult postmaster for fee ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee o's address. 2. Restricted Delivery (Extra charge) Article Number Type of Service:
Signature - / × Signature - / × Signature - / × Signature - / × To Date of Delive Trm 3811, / SenDER: Signature - / × Signature - /	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional s (les) for additional s to whom delivered (Extra ena M. T. 60 Gibson	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 BIS DOMESTIC RETURN RECEIPT ional services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a prvices are available. Consult postmaster for fe a's address. 2. Restricted Delivery (Extra charge) Article Number Type of Service: Registred Insured COD Evenes in Sured COD
Signature - / X Signature - / X Constraints Signature - / X Signature -	Agent ery Apr. 1989 Complete items sss in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra ena M. T. 60 Gibson .O. Box 3	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 BIS DOMESTIC RETURN RECEIPT tional services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a arrvices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge) Type of Service: Registered Insured Codd <p< td=""></p<>
5. Signature – / 6. Signature – / 7. Date of Delive 7. Date of Deli	Agent ery Apr. 1989 Complete items sss in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra ena M. T. 60 Gibson .O. Box 3	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991 Ins DOMESTIC RETURN RECEIPT ional services are desired, and complete iter verse side. Failure to do this will prevent this cae ovide you the name of the person delivered to a pervices are available. Consult postmaster for fease address. 2. Restricted Delivery (Extra charge) Type of Service: Registered Insured Codd Codd Certified Always beat signature of ddressee
Signature - / X Signature - / X C. Date of Delive Trm 3811, / SENDER:	Agent ery Apr. 1989 Complete items sss in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra ena M. T. 60 Gibson .O. Box 3	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991 Into DOMESTIC RETURN RECEIPT Ional services are desired, and complete itel verse side. Failure to do this will prevent this co ovide you the name of the person delivered to a prvices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge) Type of Service: Registed Insured COD Express Mail Always basis signates of ddressee Cor agent an DATEDEL VERD.
5: Signature – A 6: Signature – A 7: Date of Deliver Trm 3811, A SENDER: 3 and 4. Put your addre from being return the date of deliver and check box 1. Show 1 3 Deliver State of Deliver Sender: Sender: Sender: 1 Put your addre from being return the date of deliver A Show 1 3 Deliver Sender:	Agent ery Apr. 1989 Complete items sss in the "RETURN urned to you. The re livery. For additional s to whom delivered (Extra ena M. T. 60 Gibson .O. Box 3	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991 Ins DOMESTIC RETURN RECEIPT ional services are desired, and complete iter verse side. Failure to do this will prevent this cae ovide you the name of the person delivered to a pervices are available. Consult postmaster for fease address. 2. Restricted Delivery (Extra charge) Type of Service: Registered Insured Codd Codd Certified Always beat signature of ddressee
Signature - / / / / / / / / / / / / / / / / / /	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery, For additional (les) for additional to whom delivered (Extro- ena M. T. 60 Gibson .0. Box 3 thens, TX	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991 Into DOMESTIC RETURN RECEIPT Ional services are desired, and complete itel verse side. Failure to do this will prevent this co ovide you the name of the person delivered to a prvices are available. Consult postmaster for fee a's address. 2. Restricted Delivery (Extra charge) Type of Service: Registed Insured COD Express Mail Always basis signates of ddressee Cor agent an DATEDEL VERD.
 Signature - / X Signature - / X Date of Delive Trm 3811, / SENDER: 3 and 4. Put your addree from being return the date of del and check box 1. Show 1 Show 1 Show 1 Dr Dr A Signature X 	Agent ery Apr. 1989 Complete items ass in the "RETURN urned to you. The re livery, For additional s to whom delivered (Extra ena M. T. 60 Gibson .0. Box 3 thens, TX	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991 Ins DOMESTIC RETURN RECEIPT ional services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a prvices are available. Consult postmaster for fer a's address. 2. Restricted Delivery (Extra charge) Type of Service: Registered Insured COD Express Mate Always beat signate. Of ddressee or abert and <u>DATE PELIVERD</u> . 8. Addressee' Dedres KINLY if
 Signature – / Signature – / Signature – / Signature – / T. Date of Delive Trm 3811, / SENDER: Sand 4. Put your addree from being returns the date of delive of delive and check box 1. Show 1 Show 1 <	Agent ery Apr. 1989 Complete items ass in the "RETURN urned to you. The re livery. For additional ((es) for additional to whom delivered (Extra ena M. T. 60 Gibson .0. Box 3 thens, TX	*US.G.P.O. 1989-238-8 *US.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr 1 fees the following sc hervice(s) requested. , date, and addressee a charge) Hendricks Road 26 75751 CompPeoD	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 Interpretation of the period of the period delivered to a oride you the name of the period delivered to a ervices are available. Consult postmaster for fee os's address. 2. Restricted Delivery (Extra charge) Type of Service: Registed Insured Certified Content of the period delivered to a ervice of the period delivered to a ervice are available. Consult postmaster for fee of a address. 2. Restricted Delivery (Extra charge) Type of Service: Article Number Type of Service: Always that signature of diverse of delivered or abert and DATE DELIVERD. 8. Addressee' Diverses Marker of deliverses 8. Addressee' Diverses Marker of diverses of NLY if requested apprendict of paid.
 Signature – / Signature – / Signature – / Signature – / To Date of Delive Trm 3811, / SENDER: 3 and 4. Put your addree from being returns the date of delived and check box 1. Show the second s	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional s to whom delivered (Exrn ena M. T. 60 Gibson .0. Box 3 thens, TX FCOSC – Addressee	*U.S.G.P.O. 1989-238-8 *U.S.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr l fees the following se iservice(s) requested. , date, and addressee a charge) Hendricks Road 26	Exrege Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 B15 DOMESTIC RETURN RECEIPT ional services are desired, and complete itervices are available. Consult postmaster for fee ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee o's address. a's address. 2. Registred Insured Certifieur COD Type of Service: Registred Registred Insured Certifieur COD Express Mail Receipt Registred Insured Cartifieur CoD Bayes bail signatures of ddressee or abert and DATEPEL VEND. 8. Addressee' Orderess (UNLY if requested and personal)
 Signature – / Signature – / Signature – / Signature – / T. Date of Delive Trm 3811, / SENDER: Sand 4. Put your addree from being returns the date of delive of delive and check box 1. Show 1 Show 1 <	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional s to whom delivered (Exrn ena M. T. 60 Gibson .0. Box 3 thens, TX FCOSC – Addressee	*US.G.P.O. 1989-238-8 *US.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr 1 fees the following sc hervice(s) requested. , date, and addressee a charge) Hendricks Road 26 75751 CompPeoD	Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 RECEIVED JAN 25 1991 Ins DOMESTIC RETURN RECEIPT ional services are desired, and complete iter verse side. Failure to do this will prevent this ca ovide you the name of the person delivered to a prvices are available. Consult postmaster for fer a's address. 2. Restricted Delivery (Extra charge) Type of Service: Registered Insured COD Express Mate Always beat signate. Of ddressee or abert and <u>DATE PELIVERD</u> . 8. Addressee' Dedres KINLY if
 Signature - / Signature - / Signature - / Signature - / To Date of Deliver Trm 3811, / SENDER: S and 4. Put your addres from being return the date of del and check box Show 1 Show 1 Dr Dr A Signature x Signature x Signature x 	Agent ery Apr. 1989 Complete items ess in the "RETURN urned to you. The re livery. For additional s to whom delivered (Exrn ena M. T. 60 Gibson .0. Box 3 thens, TX FCOSC – Addressee	*US.G.P.O. 1989-238-8 *US.G.P.O. 1989-238-8 1 and 2 when additi TO'' Space on the re- turn receipt fee will pr 1 fees the following sc hervice(s) requested. , date, and addressee a charge) Hendricks Road 26 75751 CompPeoD	Exrege Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if requested and fee paid) RECEIVED JAN 25 1991 B15 DOMESTIC RETURN RECEIPT ional services are desired, and complete itervices are available. Consult postmaster for fee ovide you the name of the person delivered to a ervices are available. Consult postmaster for fee o's address. a's address. 2. Registred Insured Certifieur COD Type of Service: Registred Registred Insured Certifieur COD Express Mail Receipt Registred Insured Cartifieur CoD Bayes bail signatures of ddressee or abert and DATEPEL VEND. 8. Addressee' Orderess (UNLY if requested and personal)

SENDER: Complete items	1 and 2 when additiona	I services are desired, and complete items
3 and 4.		e side. Failure to do this will prevent this card
from being returned to you. The re	turn receint fee will provid	le you the name of the person delivered to and
and check box(es) for additional s	ervice(s) requested.	es are available. Consult postmaster for fees
1. Show to whom delivered (Extra	, date, and addressee's a a charge)	address. 2. C Restricted Delivery (Extra charge)
		Article Number
Ada P. Thom		Plolleradol04
1406 Sunset		Type of Service:
Odessa, TX	79763	Registered Insured
		Certified COD Evoress Mail Return Receipt
		for Merchandise
2. Stanlan	and Day (Cur	Always obtain signature of addressee
5. Signature - Addressee	MATCHICH	8. Addressee's Address (ONLY if
O ANNI PANA	mpson	requested and fee paid)
6. Signature – Agent		
X	·	
7. Date of Delivery	<u></u>	
	1.91	
S Form 3811, Apr. 1989	*U.S.G.P.O. 1989-238-8	DOMESTIC RETURN RECEIPT
	and 2 when additional	services are desired, and complete items
3 and 4. 'ut your address in the "RETURN"	TO" Space on the reverse	side. Failure to do this will prevent this card
rom being returned to you. The ret he date of delivery. For additional	urn receipt fee will provide fees the following service	e you the name of the person delivered to and es are available. Consult postmaster for fees
nd check box(es) for additional se	ervice(s) requested.	
	charge)	(Extra charge)
Fay Nell Wi	llingham	Article Number
Route 7	LTTIGHAM	Plallelddelag
Athens, TX (75751	Type of Service:
		Certified COD
	()	Express Mail Return Receipt
and in the		Always obtain signature of addressee
x/Stecher Cox	notook	agent and DATE DELIVERED.
. Signature - Addressee	7707	8. Addressee's Address (ONLY if
Jul par		requested and fee paid)
5. Signature – Agent /	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	
. Date of Delivery	A CA	IN 3
Form 3811 , Apr. 1989	* U.S.G.P.O . 1989-238-81	15 DOMESTIC RETURN RECEIPT
······································		
SENDER: Complete items 1	and 2 when additional	services are desired, and complete items
If YOUR address in the "PETLION T	011 0	
e date of delivery Ent additional	and the falle	side. Failure to do this will prevent this card you the name of the person delivered to and s are available. Consult postmaster for fees
d check box(es) for additional ser ☐ Show to whom delivered, of the series of the se	vice(s) requested.	
(Extra d	charge)	dress. 2. C Restricted Delivery (Extra charge)
Article Addressed to:		4. Article Number
Cometa J. Campbe	11	P 676 666 097
Route 7		Type of Service:
thens, TX 7575		
ic: Strata Cor	no: 1001	XCertifiêd COD
		for Merchandise
		or agent and DATE DELIVERED.
Signature - Addressee		8. deressee's Address (ONLY if
Tomilia Campbell	6 23	requested and fee paid)
Signature - Agent	199	
	/〉	
Date of Delivery	V SP	0
orm 3811, Apr. 1989	*U.S.G.P.O. 1989-238-815	DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. ■ 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1.
Show to whom delivered, date, and addressee's address. 2.
 Restricted Delivery (Extra charge) (Extra charge) Article Number اا و 0 Type of Service: Jolene H. McMillen Registered Insured Rt 1, Box 75 🗆 сор Certified Return Receipt for Merchandise Santo, TX 76472 Express Mail Always, obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if Signature requested and fee paid) Signature 0 がらずらら Date of Delivery -28:91 PS Form 3811, Apr. 1989 DOMESTIC RETURN RECEIPT *U.S.G.P.O. 1989-238-815 - e -SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. C Restricted Delivery (Extra charge) Article Number Beverly T. Ward OL 7047 Bissonnett #24 DL \mathbf{n} Type of Service: Houston, TX 77074 Registered Insured Certified 🗆 сор Return Receipt for Merchandise Express Mail Always obtain signature of addressee agent and DATE DELIVERED Signature Addressee 8. Addressee's Address (ONLY if Х requested and fee, paid) 6. Signature - Agent х 7. Date of Delivery 24 1991 PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. ■ 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1 □ Show to whom delivered date and addressee's address. 2. □ Restricted Delivery 1. Show to whom delivered, date, and addressee's address. 2.
Restricted Delivery (Extra charge) Article Number Choice Thompson ١١ ٩ Family Trust Type of Service: c/o Syble Thompson Registered Rt 9, Box 55 Certified Сор Sour Lake, TX 77659 Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED Signeture - Addressee 8. Addressee's Address (ONLY if Х requested and fee paid) 6. Sign Agrent X Date o Deliv PS Form 3811; Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

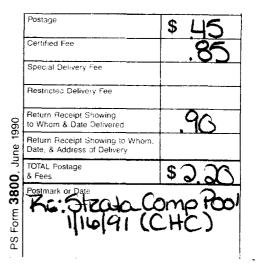


Wesley Thompson, Jr. 2810 Brook River Ct. Sugarland, TX 77478

	Postage	\$.45
	Certified Fee	.85
	Special Delivery Fee	
	Restricted Delivery Fee	
066	Return Receipt Showing to Whom & Date Delivered	.90
June 1990	Return Receipt Showing to Whorn, Date: & Address of Delivery	
	TOTAL Postage & Fees	\$2,20
PS Form 3800.	hi: Stroug Cor Iliulai (C	nofeol HC



Oscar Taylor Rt 5, Box 702 Conroe, TX 77304



8 676 666 338



Certified Mail Receipt

No Insurance Coverage Provided Do not use for International Mail UNITED STATES (See Reverse)

Bona Lou Conard 2226 Seagrape Circle Cocoanut Creek, FL 33066

	Postage	\$.45			
	Certified Fee	.85			
	Special Delivery Fee				
	Restricted Delivery Fee				
06	Return Receipt Showing to Whom & Date Delivered	.90			
ine 19	Return Receipt Showing to Whom, Date, & Address of Delivery				
י ה	TOTAL Postage & Fees	\$ 2.20			
PS Form 38UU, June 1990	Postmark or Date Re: Strata Comp. Poo 1/16/91 (CHC)				

6 626 666 700



Lois Ancil Morrison Harris P.O. Box 132 Malakoff, TX 75748

Postage	\$ 45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Del vered	90
to Whom & Date Del veled Return Receipt Showing to Whom. Date, & Address of Delivery	
& Face	\$233
Postmark or Date	onotoo
Ric: Strong Color	LHC)

P 676 666 110



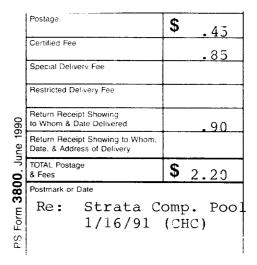
Leo Szczota P.O. Box 851 Rancho Santa Fe, CA 92067

	Postage	\$.45	
Ī	Certified Fee	.85	
	Special Delivery Fee		
	Restricted Delivery Fee		
90	Return Receipt Showing to Whom & Date Delivered	.90	
ne 19	Return Receipt Showing to Whom, Date, & Address of Delivery		
0 , Ju	TOTAL Postage & Fees	\$2.20	
PS Form 3800, June 1990	Postmark or Date Re: Strata 1/16/9	a Comp. P 91 (CHC)	00

Р БУБ БББ 155

No Insurance Coverage Provided Do not use for International Mail (See Reverse)

Gartha M. Jones 652 S. Ripple Creek Houston, TX 77057



34.7 3 121 1-1 120	1000 \$ 10 -12 F	Suboir. into los	8-2330 51010
	11 - 31 - 21 - 23 - 21 - 32 - 21 21 - 31 - 21 - 23 - 27 - 72 - 2 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 23 - 27 - 72 - 2 21 - 21 - 21 - 21 - 21 - 27 - 2 21 - 21 - 21 - 21 - 21 - 27 - 2 21 - 21 - 21 - 21 - 21 - 27 - 2 21 - 21 - 21 - 21 - 21 - 27 - 2 21 - 21 - 21 - 21 - 21 - 2 21 - 21 - 21 - 21 - 21 - 2 21 - 21 - 21 - 21 - 21 - 2 21 - 21 - 21 - 21 - 2 21 - 21 - 21 - 21 - 2 21	Ameco 4 1 33 Foster Pet.	18 47 41 41 41 41 41 41 41 41 41 41 41 41 41
192 (NO.0	Bril Bril I. I. I. 35,0-33 - 36- 31 125,	RE DIISPE ET	J.S. Crump, Charleia A. T.
25 B 4 0 1 1 2 C (Do) 137 4 5	JAL JATNIJAO JAS		Nem : 20AC
- 42 143	Amoco Bril	· · · · · · · · · · · · · · · · · · ·	Church Centromet
	Amora I and Amora	Suber Citier Service, etcl, MI	Try. Gor Strong
	Amoco (150 + / 52 * / 51 * / 52 * / 52 * / 151 * / 15	12 15 7 - Fra SO. HOBBS (B) (GRBG-SA-) UNITI	
й дм "А" 73 — 75 из — 1112: из — 111 — 112	75 173. Parto III PTT 73 Parto III F Divided	AMOCO (OPER)	Ply Touth
Amoco	15 86 163 She 169 14 Amoco Terrui 17 d 1001	Martin- dele Selmen 184811	12
Cone in St	M Mi Nell elans an Arroco, etal	All Freness P. Serberzugn, 15: All B. Loud Selmmin Off TDesdel Inc. DM 7-1-45	Leuis D. Cejn
	Amoco A McHeilletel	Hugh Lamoco Kengi OLG	E 15 44
R H.	1 1919 1010 103 1010001 . 1 1919 1010 103 1010001 . 105 1010 107	Son III S-24-17 J.H. Peocock, erol, MI	
	Amoco -15 -15 -10 -17	indiana Norden Oil MI	
8 P Para Source 8432 Transfer	- st Amoco Tersia Sutar Sutar	Broham Ruth Sponden 1	10tes Pet. etei 77132 1800
Neille Vinter	410. [Exoco	RE Brooks Amotover	U.S., MI J.H. JASelmon(s) Fronts
	NS Smelt ere Provider de la sinelle ere provide de la sinelle ere provide de la sinelle ere provide de la sinelle	Aighiona ITEC	M R. 2 14
Terry	A Contraction (C)	Biedsee Pet. Foster 1430 85 LBO DI Com Suaso	
6 J . 6 J	All Pipeline GISL D Igere La Cross Timbers, Hal 221 90 1	Birdsoe Pet. 23 (Amoco) 1: Examiner	1 2 Amo
3.85 [12.3 03 [17.3 05]	ASIGA 11 7 90 [C.G.] 3 16 09 [Sprager 	Case No.	10235 Strata#2
. 71	איזאי אר הבה-איצעו אר.	Hay I a grow Livright	Fronk Jerman, el

0

DEFORE EXAMINER STOGNER Oil Conservation Division Strata Exhibit No. 2 Case No. 10235