

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

**NORTHSTAR PARTNERS INC**  
**4200 S. CARAWAY**  
**JONESBORO, AR 72404**



9590 9403 0740 5196 7083 70

2. Article Number (Transfer from service label)

7015 1730 0001 5162 6960

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Dorothy Wells*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Dorothy Wells*

C. Date of Delivery

*6-20*

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

X ☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Restricted Delivery

UNITED STATES POSTAL SERVICE

MEMPHIS  
TN 380

20 JUN '17

PM 4 L



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4® in this box•

CITY OF JONESBORO  
PLANNING & INSPECTION DEPT.  
P. O. BOX 1845  
JONESBORO, AR 72403

USPS TRACKING#



9590 9403 0740 5196 7083 70

RZ17-18

**SENDER: COMPLETE THIS SECTION**

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1.

**PAUL ARMAH**  
**5412 MAPLE VALLEY DRIVE**  
**JONESBORO, AR 72404**



9590 9403 0740 5196 7081 96

2. Article Number (Transfer from service label)

7015 1730 0001 5162 6885

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

B. Received by (Printed Name)

☐ Agent☐ Addressee

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail

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

... Restricted Delivery

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

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CITY OF JONESBORO  
PLANNING & INSPECTION DEPT.  
P. O. BOX 1845  
JONESBORO, AR 72403

USPS TRACKING#



9590 9403 0740 5196 7081 96

R2-17-18

## SENDER: COMPLETE THIS SECTION

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1. /

**PAUL MOORE**  
**5408 MAPLE VALLEY DRIVE**  
**JONESBORO, AR 72404**



9590 9403 0740 5196 7082 19

2. Article Number (Transfer from service label)

7015 1730 0001 5162 6908

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Carol Kay Moore

☐ Agent☐ Addressee

B. Received by (Printed Name)

Carol Kay Moore

C. Date of Delivery

6-21-17

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

3. Service Type

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

Restricted Delivery

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1. Address

**DENISE KING  
516 MELTON  
JONESBORO, AR 72401**

**9590 9403 0740 5196 7082 57**

2. Article Number (Transfer from service label)

**7015 1730 0001 5162 6953****COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

**3. Service Type**

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail

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

Restricted Delivery

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**CHRISTOPHER ZIEGLER**  
**2305 JAY BEE**  
**JONESBORO, AR 72401**



9590 9403 0740 5196 7082 33

Article Number (Transfer from service label)

7015 1730 0001 5162 6939

Form 3811, April 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

|                                                                                                                                                 |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| A. Signature<br>                                                                                                                                |                                  |
| B. Received by (Printed Name)<br>Christopher Ziegler                                                                                            | C. Date of Delivery<br>X 6/23/17 |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If YES, enter delivery address below: |                                  |

**3. Service Type**

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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1. Article Addressed to:

**LERETA  
1123 PARK VIEW DRIVE  
COVINA, CA 91724**



9590 9403 0740 5196 7082 02

Article Number (Transfer from service label)

7015 1730 0001 5162 6892

Form 3811, April 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

|                               |                                                                                                        |
|-------------------------------|--------------------------------------------------------------------------------------------------------|
| A. Signature <b>X</b>         |                                                                                                        |
| B. Received by (Printed Name) |                                                                                                        |
| C. Date of Delivery           | D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No |

**3. Service Type**

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

Domestic Return Receipt

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1. Article Addressed to:

**JONATHAN M FRYE  
2307 JAYBEE DRIVE  
JONESBORO, AR 72404**

**9590 9403 0740 5196 7082 64**

2. Article Number (Transfer from service label)

**7015 1730 0001 5162 6915****COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

B. Received by (Printed Name)

*Shannon Frye*☐ Agent☐ Addressee

C. Date of Delivery

*6-19-17*D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

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

stricted Delivery

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1. Article Addressed to:

**LIVING WORK CHURCH  
5601 SOUTHWEST DRIVE  
JONESBORO, AR 72404**



**9590 9403 0740 5196 7081 89**

2. Article Number (Transfer from service label)

**7015 1730 0001 5162 6878**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Danni Beavers*

C. Date of Delivery

*6-19-17*

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®

- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

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

Restricted Delivery