

7015 1730 0001 5162 4515

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

Postmark  
Here

Postage \$ **.50**  
 Total Postage and Fees \$ **4.00**

**11-20-19**  
**\$4.00**

Sent To **John T. Douglas**  
 Street and Apt. No., or PO Box No. **2212 Harrisburg Rd.**  
 City, State, ZIP+4® **Jonesboro AR 72401**

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

See Reverse for Instructions

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☐ Adult Signature Restricted Delivery \$

Postmark  
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Postage \$ **.50**  
 Total Postage and Fees \$ **4.00**

**11-20-19**  
**\$4.00**

Sent To **Delaney, Inc.**  
 Street and Apt. No., or PO Box No. **1708 Wembleton Dr.**  
 City, State, ZIP+4® **Jonesboro AR 72401**

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

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☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage \$ **.50**  
 Total Postage and Fees \$ **4.00**

**11-20-19**  
**\$4.00**

Sent To **Joyce Scarborough**  
 Street and Apt. No., or PO Box No. **616 E. Oak Ave.**  
 City, State, ZIP+4® **Jonesboro AR 72401**

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

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

Postmark  
Here

Postage \$ **.50**  
 Total Postage and Fees \$ **4.00**

**11-20-19**  
**\$4.00**

Sent To **Joyce Gurdian**  
 Street and Apt. No., or PO Box No. **616 E. Oak Ave.**  
 City, State, ZIP+4® **Jonesboro AR 72401**

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

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☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage \$ **.50**  
 Total Postage and Fees \$ **4.00**

**11-20-19**  
**\$4.00**

Sent To **Jonesboro Schools - Attn: Kim Wilbank**  
 Street and Apt. No., or PO Box No. **2506 Southwest Square**  
 City, State, ZIP+4® **Jonesboro AR 72401**

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

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Certified Mail Fee \$ <u>3.50</u>	Postmark Here <u>11-20-19</u> <u>\$4.00</u>
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ <u>.50</u>	
Total Postage and Fees \$ <u>\$4.00</u>	
Sent To <u>Midian Development, LLC</u> Street and Apt. No., or PO Box No. <u>3108 Hillis St</u> City, State, ZIP+4® <u>Jonesboro, AR 72401</u> PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ <u>.50</u>	
Total Postage and Fees \$ <u>4.00</u>	
Sent To <u>LS Holdings, LLC</u> Street and Apt. No., or PO Box No. <u>9265 Weldon Cv</u> City, State, ZIP+4® <u>Jonesboro, AR 72404</u> PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ <u>.50</u>	
Total Postage and Fees \$ <u>\$4.00</u>	
Sent To <u>JSH Properties, LLC</u> Street and Apt. No., or PO Box No. <u>4706 Wildwood Ln.</u> City, State, ZIP+4® <u>Jonesboro, AR 72405</u> PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ <u>.50</u>	
Total Postage and Fees \$ <u>\$4.00</u>	
Sent To <u>St. Bernards Hospital</u> Street and Apt. No., or PO Box No. <u>P.O. Box 1700</u> City, State, ZIP+4® <u>Jonesboro, AR 72403</u> PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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Postage \$ <u>.50</u>	
Total Postage and Fees \$ <u>\$4.00</u>	
Sent To <u>Springwater Partners Architects, LLC</u> Street and Apt. No., or PO Box No. <u>90 McL Commercial Properties, Inc.</u> City, State, ZIP+4® <u>830 S. Sepulveda Blvd. Ste. 200</u> <u>El Segundo, CA 90245</u> PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ <u>.50</u>	
Total Postage and Fees \$ <u>\$4.00</u>	
Sent To <u>OBSC Inc c/o William Young Jr. MPPA</u> Street and Apt. No., or PO Box No. <u>901 Windover Rd.</u> City, State, ZIP+4® <u>Jonesboro, AR 72401</u> PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	