

**SENDER: COMPLETE THIS SECTION**

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

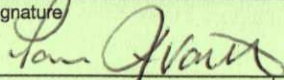
1. Article Addressed to:

**CENTRAL ARKANSAS LAND DEV LLC**  
**11708 KANIS ROAD**  
**LITTLE ROCK, AR 72211**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X


 Agent Addressee

B. Received by (Printed Name)

Central Ark Land

C. Date of Delivery

6-19-17

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

 No Priority Mail Express™ Return Receipt for Merchandise Collect on Delivery

4. Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

(Transfer from service label)

7015 1730 0001 5162 6793

LITTLE ROCK  
UNITED STATES POSTAL SERVICE

19 JUN '17

PN 3 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

RZ 17-16

**SENDER: COMPLETE THIS SECTION**

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

**JOSEPH KERBY**  
**3520 CHARLESTON DRIVE**  
**JONESBORO, AR 72404**

2. Article Number  
(Transfer from service label)

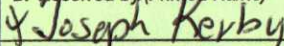
7015 1730 0001 5162 6830

**COMPLETE THIS SECTION ON DELIVERY**

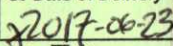
A. Signature


 Agent Addressee

B. Received by (Printed Name)



C. Date of Delivery


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

3. Service Type

 Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



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Postage & Fees Paid  
USPS  
Permit No. G-10

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

R217-16

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1. Article Addressed to:

**BILLY JOE AND SUSIE TURNER**  
**3821 CR 333**  
**JONESBORO, AR 72401**

2. Article Number

(Transfer from service label)

7015 1730 0001 5162 6700

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Billy Joe Turner* 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

Service Type

Certified Mail®

 Priority Mail Express™

Registered

 Return Receipt for Merchandise

Insured Mail

 Collect on Delivery

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
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USPS  
Permit No. G-10

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

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

R217-16

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1. Article Addressed to:

**STROBBE ENTERPRISES, LLC  
1213 CARDINAL ROAD  
JONESBORO, AR 72401**

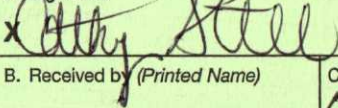
2. Article Number

*(Transfer from service label)*

7015 1730 0001 5162 6816

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature


 Agent AddresseeB. Received by *(Printed Name)*

C. Date of Delivery

06-17-17

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

THOMAS

3. Service Type

 Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery4. Restricted Delivery? *(Extra Fee)* Yes

UNITED STATES POSTAL SERVICE



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

RZ17-1L



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1. Article Addressed to:

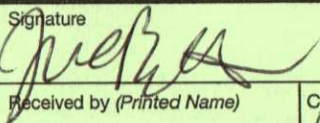
**HCCC, LLC**  
**361 SOUTHWEST DRIVE 307**  
**JONESBORO, AR 72401**

2. Article Number

*(Transfer from service label)***COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X


 Agent AddresseeB. Received by *(Printed Name)*

C. Date of Delivery

6-17-17

D. Is delivery address different from item 1?  Yes No

If YES, enter delivery address below:

3. Service Type

 Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery4. Restricted Delivery? *(Extra Fee)* Yes

7015 1730 0001 5162 6748

UNITED STATES POSTAL SERVICE



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

R217-16

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1. Article Addressed to:

**BLUE BYRD CONSTRUCTION**  
**2520 EVIE LANE**  
**JONESBORO, AR 72404**

2. Article Number  
(Transfer from service label)

7015 1730 0001 5162 6755

PS Form 3811, July 2013

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

XX Woodrow Byrd

 Agent Addressee

B. Received by (Printed Name)

X Woodrow Byrd

C. Date of Delivery

X 6/20/17

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



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

R217-16

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1. Article Addressed to:

**JIMMY SHELTON  
400 SHADOW RIDGE  
JONESBORO, AR 72404**



9590 9403 0740 5196 7083 49

2. Article Number (Transfer from service label)

7015 1730 0001 5162 6342

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

xx Johnny Shelton

- Agent  
 Addressee

B. Received by (Printed Name)

x Johnny Shelton

C. Date of Delivery

x 6/20

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

3. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Adult Signature                                | <input type="checkbox"/> Priority Mail Express®                     |
| <input checked="" type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                     | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery             | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                            | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery        | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

UNITED STATES POSTAL SERVICE



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 DIV.  
P. O. BOX 1845  
JONESBORO, AR 72403

USPS TRACKING#



9590 9403 0740 5196 7083 49

R217-1C

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
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1. Article

**PARK LAKE  
3700 KRISTI LAKE  
JONESBORO, AR 72404**



9590 9403 0740 5196 7083 63

2. Article Number (Transfer from service label)

7015 1730 0001 5162 6694

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Cande Jones*

 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

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

Restricted Delivery

Restricted Delivery

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1. Article Addressed to:

**MICHAEL WAYNE ROLAND**  
**3528 CHARLESTON DRIVE**  
**JONESBORO, AR 72404**

2. Article Number  
(Transfer from service label)

7015 1730 0001 5162 6717

PS Form 3811, July 2013

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Carol Mary* Agent Addressee

B. Received by (Printed Name)

*Carol Mary*

C. Date of Delivery

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

3. Service Type

 Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee)

 Yes

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY** Agent Addressee

C. Date of Delivery

Is delivery address different from item 1?  YesIf YES, enter delivery address below:  No Priority Mail Express™ Return Receipt for Merchandise Collect on Delivery

Extra Fee)

 Yes

81



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

**CERTIFIED MAIL**



7015 1730 0001 5162 6823



**UNCLAIMED**

*Box closed*

**MIDLAND SERVICES  
P.O. BOX 560807  
DALLAS, TX 75356-0807**

UNC

75356-080707



75356

U.S. POSTAGE  
PAID  
JONESBORO, AR  
72401  
JUN 15 17  
AMOUNT

**\$6.10**

R2305E124811-06



UNITED STATES  
POSTAL SERVICE

1000

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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1. Article Addressed to:

**MIDLAND SERVICES  
P.O. BOX 560807  
DALLAS, TX 75356-0807**

2. Article Number  
(Transfer from service label)

7015 1730 0001 5162 6823

PS Form 3811, July 2013

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt

R217-16

PHYSICIAN DEPT.  
P. O. BOX 1845  
JONESBORO, AR 72403

CERTIFIED MAIL



MEMPHIS TN

15 JUN 2017 PM

7015 1730 0001 5162 6809



UNCLAIMED

K.N  
6/17/17  
6-23  
7-2

ERC CONSTRUCTION  
121 CR 7664  
JONESBORO, AR 72401

U.S. POSTAGE

PAID

JONESBORO, AR

72401

JUN 15 17

AMOUNT

\$6.10

R2305E124811-06



72401



1000

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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1. Article Addressed to:

**ERC CONSTRUCTION**  
**121 CR 7664**  
**JONESBORO, AR 72401**

2. Article Number  
(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- Certified Mail®
- Priority Mail Express™
- Registered
- Return Receipt for Merchandise
- Insured Mail
- Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes

7015 1730 0001 5162 6809

RZ17-16

PS Form 3811, July 2013

Domestic Return Receipt