



Office of Code Enforcement
P.O. Box 1845, Jonesboro, AR 72403

870-933-4658

AFFIDAVIT

Oscar Mendoza
19219 W Melbin
Buckeye AZ 85326

RE: 1612 W Allen

I, Michael McQuay, a Code Enforcement Officer, being duly sworn upon oath, that I served the attached notice(s) upon each of the persons or firms therein addressed, by depositing copies thereof in the United States Mail, enclosed within envelopes plainly addressed, as shown with postage fully prepaid, at the Jonesboro, Arkansas Post Office located at 310 East Street, Suite A., before 3:00 P.M., on the 5th day of June, 2024.

Michael McQuay
Michael McQuay
Jonesboro Code Enforcement

Subscribed and sworn to before me the 5th day of June, 2024.

Maria Rezendez
Notary Public



My commission expires: 10 March 2034



DATE	INVOICE NO
6/4/2024	0067790

BILL TO
Oscar Mendoza 19219 W Melbin Buckeye, AZ 85326

DUE DATE
7/25/2024

DESCRIPTION	QUANTITY	EFFECTIVE RATE	AMOUNT	DISCOUNT	CREDIT	BALANCE
PREVIOUS OUTSTANDING BALANCE						0.00
Code Enforcement Charges:						
Filing Fee - 612 W Allen	1.00	15.00	15.00	0.00	0.00	15.00
Admin. Fee - 612 W Allen	1.00	200.00	200.00	0.00	0.00	200.00
Mowing - 612 W Allen	1.00	150.00	150.00	0.00	0.00	150.00
INVOICE TOTAL:			365.00	0.00	0.00	365.00

PLEASE DETACH BOTTOM PORTION & REMIT WITH YOUR PAYMENT

For questions please contact us at (870) 932-3042

Customer Name: Oscar Mendoza
 Customer No: 024387
 Account No: 0035879 - Code Enforcement Charges

DUE DATE	INVOICE NO
7/25/2024	0067790

Please remit payment by the due date to:

City of Jonesboro
 300 South Church Street
 PO Box 1845
 Jonesboro, AR 72403

Invoice Total: 365.00
 Discounts: 0.00
 Credit Applied: 0.00
 Ending Balance: 365.00

INVOICE BALANCE: \$365.00
AMOUNT PAID: _____

9589 0710 5270 0975 5795 39

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

Total Postage and Fees

\$ _____

Sent To

OSCAR BENDER

Street Address No., or PO Box No.

10020 JONES ST

City, State, ZIP+4®

BUCKEYE AZ 85326

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

