

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

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

Jonesboro, AR 72403

OFFICIAL USE

Certified Mail Fee \$3.55 0408 44

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

- Return Receipt (hardcopy) \$11.00
- Return Receipt (electronic) \$0.00
- Certified Mail Restricted Delivery \$0.00
- Adult Signature Required \$0.00
- Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$6.95 01/15/2021

Sent To _____

Street and Apt. No., or PO Box No. _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Little Rock, AR 72225

OFFICIAL USE

Certified Mail Fee \$3.55 0408 44

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

- Return Receipt (hardcopy) \$11.00
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Fayetteville, AR 72703

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Postage \$0.55

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State University, AR 72467

OFFICIAL USE

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Postage \$0.55

Total Postage and Fees \$6.95 01/15/2021

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0408 44

7020 2450 0002 0538 2497

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01/15/2021

0408 44

7020 2450 0002 0538 2480

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0408 44

7020 2450 0002 0538 2473

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01/15/2021

0408 44

7020 2450 0002 0538 2466

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01/15/2021

0408 44

7020 2450 0002 0538 2459

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0408 44

7020 2450 0001 4772 8001

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01/15/2021

0408 44

7020 2450 0001 4772 7998

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

SHELBY SIMONS
4001 WILLOW RIDGE DR
JONESBORO, AR 72405

2. Article Number (Transfer from service label)

9590 9402 5686 9346 2723 14

7020 2450 0002 0538 2480

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent

X Received by (Printed Name) Addressee

DAVID BELL Date of Delivery

1/19/21 Yes No

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

If YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail

Registered Mail Restricted

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

VFW
PO Box 651
JONESBORO, AR 72403

2. Article Number (Transfer from service label)

9590 9402 6150 0209 7925 95

7020 2450 0002 0538 2459

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent

X Received by (Printed Name) Addressee

DAVID BELL Date of Delivery

1/19/21 Yes No

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

If YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail

Registered Mail Restricted

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

LATHMORA STREET
4001 WILLOW RIDGE DR.
JONESBORO, AR 72401

2. Article Number (Transfer from service label)

9590 9402 5686 9346 2722 84

7020 2450 0002 0538 2497

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent

X Received by (Printed Name) Addressee

DAVID BELL Date of Delivery

1/19/21 Yes No

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

If YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail

Registered Mail Restricted

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

ARKANSAS STATE UNIVERSITY
PO Box 2100
STATE UNIVERSITY, AR 72467

2. Article Number (Transfer from service label)

9590 9402 5686 9346 2722 77

7020 2450 0002 0538 2466

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent

X Received by (Printed Name) Addressee

DAVID BELL Date of Delivery

1/19/21 Yes No

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

If YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail

Registered Mail Restricted

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

ARTHUR BERRY
4001 WILLOW RIDGE DR.
JONESBORO, AR 72405

2. Article Number (Transfer from service label)

9590 9402 6150 0209 7926 18

7020 2450 0001 4772 7998

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent

X Received by (Printed Name) Addressee

DAVID BELL Date of Delivery

1/19/21 Yes No

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

If YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail

Registered Mail Restricted

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

ISBEN / CO MICHAEL D
PO BOX 250565
LITTLE ROCK AR 72205-0565

2. Article Number (Transfer from service label)

9590 9402 5686 9346 2716 45

7020 2450 0001 4772 8001

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent

X Received by (Printed Name) Addressee

DAVID BELL Date of Delivery

1/19/21 Yes No

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

If YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail

Registered Mail Restricted

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt