

## 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:

DEBRA FUBANKS  
4205 MOUNT CARMEL ROAD  
JONESBORO, AR 72404



9590 9402 2237 6193 7087 72

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3819

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Debra Fubanks*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Debra Fubanks

C. Date of Delivery

10-27

D. Is delivery address different from item 1?

☐ Yes

If Yes, enter delivery address below:

☐ No

E. Type

☐ Registered Mail™☐ 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

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 7087 72

**United States  
Postal Service**

• 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

R217-30

## 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:

HOWARD FRENCH  
2110 WINTERHAVEN ST  
IONESBORO, AR 72404



9590 9402 2237 6193 7087 89

2. *Print number from service label*

7014 1820 0001 1897 3802

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

HOWARD FRENCH

C. Date of Delivery

10/27/17

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

USPS TRACKING #



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

9590 9402 2237 6193 7087 89

**United States  
Postal Service**

• 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 17-30

## 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.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*PMCM, LLC*  
*2304 STONEBRIDGE*  
*JONESBORO, AR 72401*



9590 9402 2237 6193 6800 61

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3734

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

10/2/15

Is delivery address different from item 1? ☐ Yes  
☐ No

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

(over \$500) Restricted Delivery

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

Domestic Return Receipt



USPS TRACKING#



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

9590 9402 2237 6193 6800 61

**United States  
Postal Service**

• 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

R217-30

## SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

CLAY EDWARD  
4110 SOUTHWEST DRIVE  
JONESBORO, AR 72404



9590 9402 2237 6193 7087 58

2. A (Transfer from service label)

7014 1820 0001 1897 3833

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

- ☐ Agent  
☐ Addressee

Is different from item 1? ☐ Yes  
Delivery address below: ☐ No



- ☐ 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

Domestic Return Receipt

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

USPS TRACKING#



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

9590 9402 2237 6193 7087 58

**United States  
Postal Service**

• 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



## THIS SECTION

## COMPLETE THIS SECTION

LIVERY

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.

A. Signature

X *Donald Kissinger*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

DONALD KISSINGER  
2117 WINTERHAVEN  
JONESBORO, AR 72404

Address different from item 12 ☐ Yes  
delivery address below: 01-17-2017 ☒ No



9590 9402 2237 6193 6800 47

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3758

## 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

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 6800 47

**United States  
Postal Service**

• 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

RZ17-30

## SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BRUCE SITZ  
4202 WINTERHAVEN CV  
JONESBORO, AR 72404



9590 9402 2237 6193 6801 22

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3673

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

☐ Agent  
☐ Addressee

☐ Yes  
☐ No

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

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

Restricted Delivery

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 6801 22

**United States  
Postal Service**

• 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

RZ17-30

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1. Article Addressed to:

TERREL WATKINS  
2221 MASTERS DRIVE  
JONESBORO, AR 72404



9590 9402 2237 6193 6800 54

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3741

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

☐ Agent☐ Addressee

10-27-17

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

Domestic Return Receipt



USPS TRACKING#



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

9590 9402 2237 6193 6800 54

**United States  
Postal Service**

• 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

RZ17-30

## SENDER: COMPLETE THIS SECTION

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## 1. Article Addressed to:

VALLEY VIEW SCHOOL  
2131 VALLEY VIEW DRIVE  
JONESBORO, AR 72404  
ATTN: BRYAN RUSSELL



9590 9402 2237 6193 6801 46

## 2. Article Number (Transfer from service label)

7014 1820 0001 1897 3659

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

Pamela Crane

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Pamela Crane

## C. Date of Delivery

10-27-17

Address different from item 1? ☐ Yes  
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

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 6801 46

**United States  
Postal Service**

• 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

SP17-30

## SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

JEFF LONG  
4272 WELDON LANE  
JONESBORO, AR 72404



9590 9402 2237 6193 7087 96

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3796

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

B Long

☐ Agent☐ Addressee

C. Date of Delivery

10/27/17

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
- ☐ Insured Mail

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

Restricted Delivery

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 7087 96

**United States  
Postal Service**

• 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

RZ17-30



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1.

CLYDE GRAY  
2804 WINDOVER COVE  
JONESBORO, AR 72401



9590 9402 2237 6193 7087 65

2 Article Number (Transfer from service label)

7014 1820 0001 1897 3826

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

☐ Agent☐ Addressee

C. Date of Delivery

10/22/17

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

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 7087 65

**United States  
Postal Service**

• 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

R217-30

## SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CARROLL CALDWELL  
3009 VIST CT  
JONESBORO, AR 72401



9590 9402 2237 6193 6801 08

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3697

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Carroll Caldwell*☐ Agent☐ Addressee

B. Received by (Printed Name)

CARROLL CALDWELL

C. Date of Delivery

Address different from item 1? ☐ Yes  
Delivery address below: ☐ No

- ☐ 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

(over \$500)

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 6801 08

**United States  
Postal Service**

• 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

R217-30

## 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:

*JAMES MCDANIEL*  
*1326 OAKDALE*  
*JONESBORO, AR 72401*



9590 9402 2237 6193 6800 85

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3710

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *James McDaniel* ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

X *James McDaniel* ☐ Date of Delivery  
*10/30/17*

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

- ☐ 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

Domestic Return Receipt



USPS TRACKING#



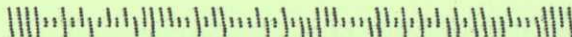
First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

9590 9402 2237 6193 6800 85

**United States  
Postal Service**

• 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



# SENDER: COMPLETE THIS SECTION

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

ROBERT LAWRENCE  
4209 WINTERHAVEN CV  
JONESBORO, AR 72404



9590 9402 2237 6193 6800 16

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3789

# COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Ralph*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

ROB LAWRENCE

C. Date of Delivery

10/31/17

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

4. 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

USPS TRACKING #



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

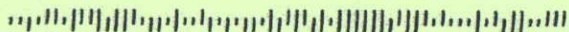
9590 9402 2237 6193 6800 16

United States  
Postal Service

• 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

R217-30



# 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:

NIKSEFAT SAEED SY  
P.O. BOX 130  
NEWPORT, AR 72112



9590 9402 2237 6193 6800 78

# COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

LARRY KENNEDY

C. Date of Delivery

10-30-17

☐ Agent

☐ Addressee

Is different from item 1? ☐ Yes  
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
- ☐ Registered Mail
- ☐ Registered Mail Restricted Delivery

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

USPS TRACKING#



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

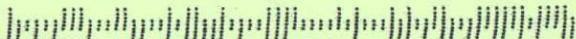
9590 9402 2237 6193 6800 78

United States  
Postal Service

• 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

RZ17-30





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- Attach this card to the back of the mailpiece, or on the front if space permits.

1.

COOPER LAND & DEVELOPMENT  
1600 COOPER LANE  
JONESBORO, AR 72401



9590 9402 2237 6193 6800 92

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3703

# COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Roy E Cooper*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Roy E Cooper

C. Date of Delivery

10/30/17

D. Is delivery address different from item 1?

☐ Yes

IF YES, enter delivery address below:

☐ No

☐ 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

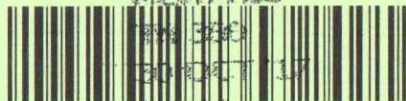
☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Restricted Delivery

USPS TRACKING#

HELPHS



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

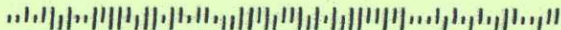
9590 9402 2237 6193 6800 92

United States  
Postal Service

• 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

03-104545



## 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. *MARGUERITE KIRKSEY*  
*5307 JOHNWOOD DRIVE*  
*JONESBORO, AR 72404*  
*C/O DEBRA MANGRUM*



9590 9402 2237 6193 6801 15

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3680

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Debra Mangrum*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Debra Mangrum*

C. Date of Delivery

different from item 1? ☐ Yes  
 every 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

☐ Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

USPS TRACKING#



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

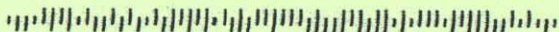
9590 9402 2237 6193 6801 15

United States  
Postal Service

• 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

R217-30



## 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:

**MORTGAGE CLEARING CORP**  
**P.O. BOX 702100**  
**TULSA, OK 74170**



9590 9402 2237 6193 6800 23

2. Article Number (Transfer from service label)

7014 1820 0001 1897 3772

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Robert J. Brown* ☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

*ROBERT J. BROWN*

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

Service Type

Signature

Signature Restricted Delivery

☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

all

Mail Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted

Delivery

☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt



USPS TRACKING #



9590 9402 2237 6193 6800 23

United States  
Postal Service

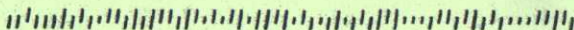
• Sender: Please print your name, address, and ZIP+4® in this box•

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

R217-30

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

1845



## 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:

**CORELOGIC**  
**P.O. BOX 9202**  
**COPPELL, TX 75019**



9590 9402 2237 6193 6800 30

2. *(Transfer from service label)*

7014 1820 0001 1897 3765

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

**X**☐ Agent☐ AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

**MIKE CORDELL**

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

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

Domestic Return Receipt

USPS TRACKING#



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

9590 9402 2237 6193 6800 30

**United States  
Postal Service**

• 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 17-30

