

**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:

GEORGE ACENEC  
P. O. BOX 92  
PILOT ROCK, OREGON 97868

2. Article Number  
(Transfer from service label)

7013 2630 0000 5740 4099

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *George Acenec* Agent Addressee

B: Received by (Printed Name)

*George Acenec*

C. Date of Delivery

*11-5-13*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

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1. Article Addressed to:

CITY OF PILOT ROCK  
P. O. BOX 130  
PILOT ROCK, OREGON 97868

2. Article Number  
(Transfer from service label)

7013 2630 0000 5740 4143

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Susan Price

 Agent Addressee

B. Received by (Printed Name)

Susan Price

C. Date of Delivery

11/3/14

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

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1. Article Addressed to:

GREGORY & LINDA COLLINS  
 P. O. BOX 442  
 PILOT ROCK, OREGON 97868

2. Article Number

*(Transfer from service label)*

7013 2630 0000 5740 4150

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

E. Collins

 Agent AddresseeB. Received by *(Printed Name)*

E. Collins

C. Date of Delivery

11/5/14

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 Delivery4. Restricted Delivery? *(Extra Fee)* Yes

**SENDER: COMPLETE THIS SECTION****COMPLETE THIS SECTION ON DELIVERY**

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1. Article Addressed to:

**COMPLETE PROPERTY SERVICES**  
**3430 LIBERTY ROAD SOUTH**  
**SALEM, OREGON 97302-4607**

2. Article Number  
(Transfer from service label)

7013 2630 0000 5740 4129

A. Signature

X *BC*

- Agent  
 Addressee

B. Received by (Printed Name)

*BONNIE Bradley*

C. Date of Delivery

*11-3-14*

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

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1. Article Addressed to:

EASTERN OREGON PETROLEUM LLC  
 513 S. W. 6<sup>TH</sup> STREET  
 PENDLETON, OREGON 97801

2. Article Number

*(Transfer from service label)*

7013 2630 0000 5740 4105

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Ron Schwing*  Agent  
 Addressee

B. Received by *(Printed Name)*

C. Date of Delivery

*R Schwing* *11-3-14*

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

**SENDER: COMPLETE THIS SECTION**

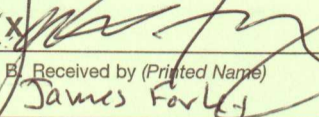
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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

JAMES & NORMA JEAN FARLEY  
P. O. BOX 23  
PENDLETON, OREGON 97801

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature



Agent

Addressee

B. Received by (*Printed Name*)

James Farley

C. Date of Delivery

11-03-14

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

2. Article Number

(*Transfer from service label*)

7013 2630 0000 5740 4136

**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.
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1. Article Addressed to:

Gary Austin  
 14838 E 50th Dr  
 Yuma, AZ 85367-  
 5211

2. Article Number

*(Transfer from service label)*

7013 2630 0000 5740 4280

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Gary Austin

 Agent AddresseeB. Received by *(Printed Name)*

GARY AUSTIN

C. Date of Delivery

11/13/14

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 Delivery4. Restricted Delivery? *(Extra Fee)* Yes

**SENDER: COMPLETE THIS SECTION****COMPLETE THIS SECTION ON DELIVERY**

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1. Article Addressed to:

JAMES, EVELYN, & JERRY HATLEY  
 P. O. BOX 458  
 PILOT ROCK, OREGON 97868

2. Article Number  
 (Transfer from service label)

7013 2630 0000 5740 4068

A. Signature

X

*John Weiske*

- Agent  
 Addressee

B. Received by (Printed Name)

*John Weiske*

C. Date of Delivery

*11/3/14*

- 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



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1. Article Addressed to:

Iron Horse Acres LLC  
 301 E Main St  
 Turlock, CA 95380-4537

2. Article Number

*(Transfer from service label)*

7013 2630 0000 5740 4259

PS Form 3811, July 2013

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x *Michelle McKay*

 Agent AddresseeB. Received by *(Printed Name)*

*Michelle McKay*

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 Delivery4. Restricted Delivery? *(Extra Fee)* Yes

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1. Article Addressed to:

KINZUA RESOURCES LLC  
 P. O. BOX 876  
 VENETA, OREGON 97487

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4112

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Deb Menge* Agent Addressee

B. Received by (Printed Name)

*Deb Menge*

C. Date of Delivery

*11-4-14*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

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1. Article Addressed to:

Susan + Mary Koch  
 PO Box CC  
 Pilot Rock, OR 97868

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4266

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Mary Koch

 Agent Addressee

B. Received by (Printed Name)

Mary Koch

C. Date of Delivery

11/7/14

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

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1. Article Addressed to:

LEWIS DOVE ANIMAL HOSPITAL  
 1945 N. W. PETTYGROVE STREET  
 PORTLAND, OREGON 97209-1688

2. Article Number

*(Transfer from service label)*

7013 2630 0000 5740 4167

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Vause

 Agent AddresseeB. Received by *(Printed Name)*

Varela B Vitel

C. Date of Delivery

11-1-14

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 Delivery4. Restricted Delivery? *(Extra Fee)* Yes

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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:

Pilot Rock Parks & Rec  
 PO Box 568  
 Pilot Rock, OR  
 97868

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4273

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x Mary K. Weinke

Agent

Addressee

B. Received by (Printed Name)

Mary K Weinke

C. Date of Delivery

11/2/14

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

Yes

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

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1. Article Addressed to:

JOHN & MARY TAYLOR  
P. O. BOX 207  
PILOT ROCK, OREGON 97868

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4082

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*John Taylor*

Agent

Addressee

B. Received by (Printed Name)

John Taylor

C. Date of Delivery

11/3/14

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