

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 and additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following service (or an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:
 Laura Depietro
 c/o Laura Nielson
 1702 Bryant Avenue
 Walla Walla, Wa. 99362

Laura L. Nielson

5. Received By: (Print Name)
 LAURA L. Nielson

6. Signature (Addressee or Agent)

4a. Article Number
 Z 330 913 627

4b. Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
 JUL 20 2000

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

IS YOUR RETURN ADDRESS COMPLETED ON THE REVERSE SIDE?

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4a and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

Carl Hontz
82255 Wildwood Lane
Umatilla, Oregon 97882

4a. Article Number

7 330 913 638

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

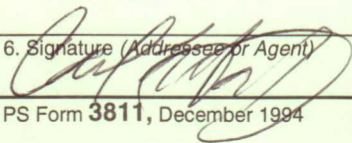
7. Date of Delivery

7-10-02

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)



Thank you for using Return Receipt Service

Is your RETURN ADDRESS completed on the reverse side?

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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following service (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:
 Orlin and Sharon Klopper
 30395 Power City Road
 Umatilla, Or. 97862

4a. Article Number
 Z 330 913 639

4b. Service Type

<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> COD

7. Date of Delivery
 6/22/00

5. Received By: (Print Name)
 Sharon Klopper

6. Signature (Addressee or Agent)
 Sharon Klopper

8. Addressee's Address (Only if requested and fee is paid)

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Complete items 3, 4a, and 4b.
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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following service (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

*Sherri M. Brown
80886 N. Hwy. 395
Hermiston, Ore. 97838*

4a. Article Number

E 330 913 632

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

6-22-94

5. Received By: (Print Name)

Sherri M. Brown

6. Signature (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

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- Complete items 3, 4a and 4b.
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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

CCOL
82075 Hwy. 395 N.
Umatilla, Or. 97882

4a. Article Number

E 330 913 634

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

6/22/00

5. Received By: (Print Name)

Cheri K. JIHANSEN

6. Signature (Addressee or Agent)

Cheri K. Jihansen

8. Addressee's Address (Only if requested and fee is paid)

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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

Ray + Linda Fox
 905 NE Washington Ave.
 Irrigon, Ore. 97844
 Linda Fox

4a. Article Number

E 330 913 637

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

6-23-00

5. Received By: (Print Name)

Linda Fox

6. Signature (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

IS YOUR RETURN ADDRESS COMPLETED ON THE REVERSE SIDE?

SENDER:

- Complete items 1 a and b for additional services.
Complete items 3, 4 and 5 for additional services.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

Martha Moore Edmiston
2646 South Leyden St.
Denver, Co. 80222

4a. Article Number

E 330 913 636

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By (Print Name)

[Handwritten Signature]
SARK

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)



Thank you for using Return Receipt Service

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4 and 4b.
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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

Ray and Linda Fox
905 NE Washington Ave.
Irrigon, OR. 97844
Linda Fox

4a. Article Number

2 330 913 732

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

6-23-00

5. Received By: (Print Name)

Linda Fox

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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- Complete items 3, 4 and 5.
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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

Martha Moore Edmiston, Trustee
 2646 South Leyden St.
 Denver, CO 80222



4a. Article Number
 Z 330 913 733

4b. Service Type

<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> COD

7. Date of Delivery

5. Received By: (Print Name)
 MARTHA MOORE Edmiston

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)
 Martha Moore Edmiston

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Is your RETURN ADDRESS completed on the reverse side?

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I also wish to receive the following service (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

Donn's Places, Inc.
29682 Country Lane
Hermiston, Or. 97838

4a. Article Number

Z 330 913 734

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

6-21-00

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

Donald D. Stales

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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following service (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:
 Carl Hontz
 82255 Wildwood Lane
 Umatilla, Oregon 97882

4a. Article Number
 E 330 913 731

4b. Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
 6-21-00

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)


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I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:
 Orlin & Sharon Kloepper
 30395 Power City Road
 Umatilla, Or. 97862

4a. Article Number
 Z 330 913 659

4b. Service Type

<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> COD

7. Date of Delivery
 6/20/00

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)
 Sharon Kloepper

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I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

*Sherri M. Brown
80886 N. Highway 395
Hermiston, OR. 97838*

4a. Article Number

E 330 913 660

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

Sherri Brown

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3 and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

CCOL
 82075 Highway 395 N.
 Umatilla, Or. 97882

4a. Article Number

Z 330 913 735

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

6/20/00

5. Received By: (Print Name)

[Handwritten Signature]

6. Signature (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.