SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X Pelau Garmal Agent Addressee B. Received by (Pfinted Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery Agent Addressee B. Received by (Pfinted Name) C. Date of Delivery Agent Addressee B. Received by (Pfinted Name) C. Date of Delivery Agent Addressee B. Received by (Pfinted Name) C. Date of Delivery Agent No
LEONARD & HELEN CARTMELL 43143 MAIN STREET	
PENDLETON, OREGON 97801	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)	
PS Form 3811, July 2013 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature A. Agent Addressee B. Received by (Printed Wame) C. Date of Delivery C. Date of Delivery
1. Article Addressed to: MARLENE KNIGHT	D. Is delivery address different from itels 1? Yes If YES, enter delivery address below: No
43049 MAIN STREET PENDLETON, OREGON 97801	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 7013 263 (Transfer from service label)	0 0000 5740 4204
PS Form 3811, July 2013 Domestic Re	turn Receipt

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 12 ☐ Yes 1. Article Addressed to: ☐ No If YES, enter delivery address below: 11-5-14 DARREL MECHAM ESTATE 43049 MAIN STREET 3. Service Type PENDLETON, OREGON 97801 ☐ Certified Mail® ☐ Priority Mail Express™ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 0545 (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receipt

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:

JEFF TIPTON
42987 MAIN STREET
PENDLETON, OREGON 97801

COMPLETE THIS SECTION ON DELIVERY A. Signature Agent □ Addressee B. Received by (Printed Name) C. Date of Delivery ☐ Yes D. Is delivery address different from item 1? If YES, enter delivery address below: □ No 3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ Registered ☐ Return Receipt for Merchandise

☐ Collect on Delivery

☐ Yes

Article Number
 (Transfer from service label)

7013 2630 0000 5740 4198

☐ Insured Mail

4. Restricted Delivery? (Extra Fee)

PS Form 3811, July 2013

Domestic Return Receipt