

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:

THOMAS & MARGUERITE DARBY
P. O. BOX 822
STANFIELD, OREGON 97875

2. Article Number

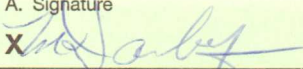
(Transfer from service label)

7013 2630 0000 5740 4044

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X



Agent

Addressee

B. Received by (Printed Name)

M DARBY

C. Date of Delivery

8/12/14

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:

MILLS MINT FARM
 77356 NORTH LOOP ROAD
 STANFIELD, OREGON 97875

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4020

COMPLETE THIS SECTION ON DELIVERY

A. Signature

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

C. Date of Delivery

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

Sent by regular mail
 9/3/2014
 J. K.

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:

ARNOLD & BEVERLY NIX
34466 KOSMOS ROAD
STANFIELD, OREGON 97875

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Beverly Nix Agent AddresseeB. Received by *(Printed Name)**BEVERLY NIX*

C. Date of Delivery

*8/11/14*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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1. Article Addressed to:

MATTHEW & SANDRA POST
 34554 KOSMOS ROAD
 STANFIELD, OREGON 97875

2. Article Number

(Transfer from service label)

7013 2630 0000 5740 4037

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Sandra Post

Agent

Addressee

B. Received by (Printed Name)

Sandra Post

C. Date of Delivery

8/21/14

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

No

Sandra

3. Service Type

Certified Mail®

Priority Mail Express™

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes