THE SUPREME COURT OF OHIO

COPY

Disciplinary Counsel,

Relator,

v.

Bryan Bright Johnson,

Respondent.

Case No. 06-1197

ON CERTIFIED REPORT BY THE BOARD OF COMMISSIONERS ON GRIEVANCES AND DISCIPLINE OF THE SUPREME COURT

RESPONDENT'S AFFIDAVIT OF COMPLIANCE

BRYAN BRIGHT JOHNSON
Respondent
One East Livingston Avenue
Columbus, Ohio 43215-5700
Telephone: 614-280-9593
Facsimile: 614-365-9741
Pro Se

JONATHAN E. COUGHLAN (0026424)
Disciplinary Counsel
Relator
250 Civic Center Drive, Suite 325
Columbus, OH 43215-7411
Telephone: 614-461-0256
Facsimile: 614-461-7205

ROBERT R. BERGER (0064922)
Counsel of Record
Assistant Disciplinary Counsel
250 Civic Center Drive, Suite 325
Columbus, OH 43215-7411
Telephone: 614-461-0256
Facsimile: 614-461-7205

Counsel for Relator

FILED
JUN 14 2007
MARCIA J. MENGEL, CLERK
SUPREME COURT OF OHIO

RESPONDENT'S AFFIDAVIT OF COMPLIANCE

STATE OF OHIO,

COUNTY OF FRANKLIN, SS:

Now comes Bryan Johnson, respondent in the above proceeding, and after being duly cautioned and sworn do state that I have complied with this court's May 16, 2007 order, a copy of which is attached hereto as Exhibit A.

1. Respondent has sent notice by certified mail, return receipt requested, to all clients being represented in pending matters and any co-counsel of his suspension and consequent disqualification to act as an attorney after the May 16, 2007 effective date of this court's May 16, 2007 order, and in the absence of co-counsel, also notified the clients to seek legal services elsewhere, calling attention to any urgency in seeking the substitution of another attorney in respondent's place. Attached hereto collectively as Exhibit B are copies of the white receipts kept for all such certified mail sent, and those green receipts which have been returned as of the date of this filing.

2. Regardless of any fees or expenses due respondent, I offered to all clients being represented in pending matters any papers or other property pertaining to the client, or have notified the clients or co-counsel, if any, of a suitable time and place where the papers or other property may be obtained, calling attention to any urgency for obtaining such papers or other property.

3. Respondent had no part of any fees or expenses paid in advance that were unearned or not paid, and accounted for any trust money or property in the possession or control of respondent.

4. Respondent has sent notice by certified mail, return receipt requested, to all opposing counsel in pending litigation or, in the absence of counsel, the adverse parties, of respondent's disqualification to act as an attorney after the effective date of this order, and filed a notice of disqualification of respondent with the court or agency before which the litigation is pending for inclusion in the respective file or files. Attached hereto collectively as Exhibit B are copies of the white receipts kept for all such certified mail sent, and those green receipts which have been returned as of the date of this filing.

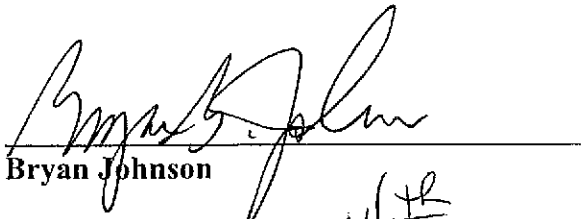
5. Respondent's notices referred to above were all sent by certified mail, return receipt requested, with a return address where communication may thereafter be directed to respondent.

6. Respondent has retained and maintained a record of the various steps taken by respondent pursuant to this order.

7. Respondent has made due and diligent effort to find his attorney registration card for the 2005/2007 biennium for purposes of surrendering same, but it has been lost or misplaced.

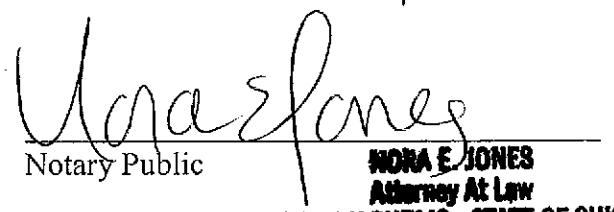
8. Respondent's address to receive communications is One East Livingston Avenue, Columbus, Ohio 43215-5700, telephone number 614-280-9593, facsimile number 614-365-9741.

FURTHER AFFIANT SAYETH NAUGHT.



Bryan Johnson

Sworn to and subscribed in my presence by Bryan Johnson on this 14th day of June, 2007.

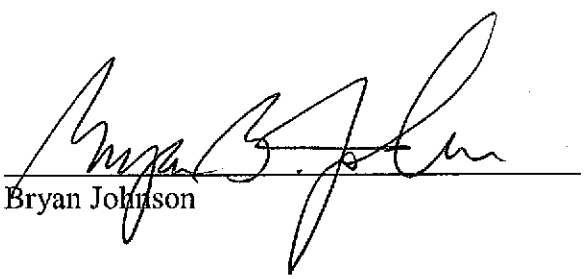


Notary Public

NORA E. JONES
Attorney At Law
NOTARY PUBLIC - STATE OF OHIO
Lifetime Commission

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing document was served upon Robert R. Berger, Jr., assistant disciplinary counsel, Supreme Court of Ohio Disciplinary Counsel, 250 Civic Center Drive, suite 325, Columbus, Ohio 43215-5454, by ordinary U.S. Mail, postage pre-paid, on this 14th day of June, 2007.



Bryan Johnson

EXHIBIT
A

FILED
MAY 16 2007
MARCIA J. MENGEL, CLERK
SUPREME COURT OF OHIO

The Supreme Court of Ohio

Case No. 06-1197

Disciplinary Counsel,
Relator,
v.
Bryan Bright Johnson,
Respondent.

ON CERTIFIED REPORT BY THE BOARD OF COMMISSIONERS ON GRIEVANCES AND DISCIPLINE OF THE SUPREME COURT

ORDER

The Board of Commissioners on Grievances and Discipline filed its Final Report in this court on June 21, 2006, recommending that pursuant to Rule V(6)(B)(5) of the Supreme Court Rules for the Government of the Bar of Ohio the respondent, Bryan Bright Johnson, be publicly reprimanded. Respondent and relator filed objections to said Final Report, relator and respondent filed answers, and this cause was considered by the court. On consideration thereof,

It is ordered and adjudged by this court that pursuant to Gov.Bar R. V(6)(B)(3) and consistent with the opinion rendered herein, respondent, Bryan Bright Johnson, Attorney Registration Number 0003981, last known business address in Columbus, Ohio, be suspended from the practice of law for a period of one year with the last six months of the suspension stayed. To ensure that respondent returns to the ethical practice of law, it is further ordered that respondent serve a six-month probationary period. It is further ordered that during the probation period, in addition to the requirements of Gov.Bar R. V(9), respondent shall advise any probate court in which he practices that he has been disciplined for excessive fee applications. It is further ordered that if respondent fails to comply with this condition, the stay shall be lifted, and respondent shall serve the entire one-year suspension. It is further ordered that, as a condition of reinstatement, respondent must file proof that he has paid $50,000 in restitution to the probate court for disbursement as assets of Bryan and Lauder.

It is further ordered that the respondent immediately cease and desist from the practice of law in any form and is hereby forbidden to appear on behalf of another before any court, judge, commission, board, administrative agency or other public authority.

It is further ordered that respondent is hereby forbidden to counsel or advise or prepare legal instruments for others or in any manner perform such services.

It is further ordered that the respondent is hereby divested of each, any, and all of the rights, privileges and prerogatives customarily accorded to a member in good standing of the legal profession of Ohio.

It is further ordered that respondent be taxed the costs of these proceedings in the amount of Five Thousand Five Hundred Forty-Four Dollars and Nine Cents ($5,544.09), which costs shall be payable to this court by certified check or money order on or before 90 days from the date of this order. It is further ordered that if these costs are not paid in full on or before 90 days from the date of this order, interest at the rate of 10% per annum shall accrue as of 90 days from the date of this order, on the balance of unpaid Board costs. It is further ordered that respondent may not apply for reinstatement until such time as respondent pays costs in full, including any accrued interest.

It is further ordered that, pursuant to Gov.Bar R. X(3)(G), respondent shall complete one credit hour of continuing legal education for each month, or portion of a month, of the suspension. As part of the total credit hours of continuing legal education required by Gov.Bar R. X(3)(G), respondent shall complete one credit hour of instruction related to professional conduct required by Gov.Bar R. X(3)(A)(1), for each six months, or portion of six months, of the suspension.

It is further ordered, sua sponte, by the court, that within 90 days of the date of this order, respondent shall reimburse any amounts that have been awarded against the respondent by the Clients' Security Fund pursuant to Gov.Bar R. VIII(7)(F). It is further ordered, sua sponte, by the court that if, after the date of this order, the Clients' Security Fund awards any amount against the respondent pursuant to Gov.Bar R. VIII(7)(F), the respondent shall reimburse that amount to the Clients' Security Fund within 90 days of the notice of such award.

It is further ordered that respondent shall not be reinstated to the practice of law in Ohio and placed on probation for a period of six months until (1) respondent files proof of restitution; (2) respondent complies with the requirements for reinstatement set forth in the Supreme Court Rules for the Government of the Bar of Ohio; (3) respondent complies with the Supreme Court Rules for the Government of the Bar of Ohio; (4) respondent complies with this and all other orders of the court; and (5) this court orders respondent reinstated.

It is further ordered that on or before 30 days from the date of this order, respondent shall:

1. Notify all clients being represented in pending matters and any co-counsel of respondent's suspension and consequent disqualification to act as an attorney after the effective date of this order and, in the absence of co-counsel, also notify the clients to seek legal service elsewhere, calling attention to any urgency in seeking the substitution of another attorney in respondent's place;

2. Regardless of any fees or expenses due respondent, deliver to all clients being represented in pending matters any papers or other property pertaining to the client, or notify the clients or co-counsel, if any, of a suitable time and place where the papers or other property may be obtained, calling attention to any urgency for obtaining such papers or other property;

3. Refund any part of any fees or expenses paid in advance that are unearned or not paid, and account for any trust money or property in the possession or control of respondent;

4. Notify opposing counsel in pending litigation or, in the absence of counsel, the adverse parties, of respondent's disqualification to act as an attorney after the effective date of this order, and file a notice of disqualification of respondent with the court or agency before which the litigation is pending for inclusion in the respective file or files;

5. Send all notices required by this order by certified mail with a return address where communications may thereafter be directed to respondent;

6. File with the clerk of this court and the Disciplinary Counsel of the Supreme Court an affidavit showing compliance with this order, showing proof of service of notices required herein, and setting forth the address where the respondent may receive communications; and.

7. Retain and maintain a record of the various steps taken by respondent pursuant to this order.

It is further ordered that on or before 30 days from the date of this order, respondent surrender the attorney registration card for the 2005/2007 biennium.

It is further ordered that respondent shall keep the Clerk and the Disciplinary Counsel advised of any change of address where respondent may receive communications.

It is further ordered, sua sponte, that all documents filed with this court in this case shall meet the filing requirements set forth in the Rules of Practice of the Supreme Court of Ohio, including requirements as to form, number, and timeliness of filings.

It is further ordered, sua sponte, that service shall be deemed made on respondent by sending this order, and all other orders in this case, by certified mail to the most recent address respondent has given to the Attorney Registration Section.

It is further ordered that the clerk of this court issue certified copies of this order as provided for in Gov.Bar R. V(8)(D)(1), that publication be made as provided for in Gov.Bar R. V(8)(D)(2), and that respondent bear the costs of publication.

THOMAS J. MOYER
Chief Justice

7006 0810 0002 3525 0074

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To: Carmencita Miller
Street, Apt. No.; or PO Box No.: 2236 Rotunda Drive
City, State, ZIP+4: Columbus Ohio 43232

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0111

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Postage	$ 1.31
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.11

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Sent To: Janet Mihaci
Street, Apt. No.; or PO Box No.: 7576 Watson Bay Ct
City, State, ZIP+4: Stone Mountain GA 30087

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Carmencita Miller
2236 Rotunda Dr.
Columbus, Ohio
43232

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Courtney Colbert ☒ Agent ☐ Addressee

B. Received by (Printed Name): Courtney Colbert
C. Date of Delivery: 6-7-07

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service la: 7006 0810 0002 3525 0074

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

EXHIBIT
B

7006 0810 0002 3525 0047

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Sent To: Lisa M. Miller
Street, Apt. No.; or PO Box No.: P.O. Box 47923
City, State, ZIP+4: District Heights, MD 20753

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7006 0810 0002 3525 0061

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To: Paris M. Miller, Jr.
Street, Apt. No.; or PO Box No.: 4894 Crosscreek Dr.
City, State, ZIP+4: Columbus, Ohio 43232

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0654

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To: Braden A. Blumenstiel Esq.
Street, Apt. No.; or PO Box No.: Blumenstiel, Hahn, Adams & Evans 261 W. Johnstown Rd
City, State, ZIP+4: Columbus, Ohio 43230

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7006 0810 0002 3525 0661

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Edward F. Pelfeson Esq.
Street, Apt. No.; or PO Box No.: Edward F. Pelfeson Co. LPA 65 East Gay St., Suite 404
City, State, ZIP+4: Columbus, Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Braden A. Blumenstiel, Esq.
261 West Johnstown Rd
Columbus, Ohio
43230

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Camille Kaminsky ☐ Agent ☐ Addressee

B. Received by (Printed Name): Camille Kaminsky
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 ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la*: 7006 0810 0002 3525 0654

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7006 0810 0002 3522 8868

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: Richard J. Lacivita
Street, Apt. No.; or PO Box No.: Shapiro & Felty, LLP Suite 400
City, State, ZIP+4: 1500 West Third Street Cleveland Ohio 44113

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0609

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: Credit Thrift America Inc. No 2
Street, Apt. No.; or PO Box No.: 351 W. Central Ave.
City, State, ZIP+4: Delaware Ohio 43015

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 8844

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Amy Fogelman
Street, Apt. No.; or PO Box No.: Lerner Sampson & Rothfuss P.O. Box 5480
City, State, ZIP+4: Cincinnati, Ohio 45201

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7006 0810 0002 3522 8851

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: James W. Wheeler Esq.
Street, Apt. No.; or PO Box No.: Wiles Boyle Burkholder & Bringardner 300 Spruce St, Floor One
City, State, ZIP+4: Columbus Ohio 43215

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1. Article Addressed to:

Amy Fogelman, Esq.
Lerner Sampson & Rothfuss
P.O. Box 5480
Cincinnati, Ohio 45201

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): [illegible] C. Date of Delivery

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

JUN 08 2007 USPS

3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3522 8844

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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:

James Wheeler, Esq.
Wiles, Boyle, Burkholder & Bringardner
300 Spruce St. Floor One
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Shea Parsons C. Date of Delivery

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

JUN 12 2007

3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3522 8851

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: Benjamin Zacks, Esq.
Street, Apt. No.; or PO Box No.: Zacks Law Group LLC The E. Building 3rd
City, State, ZIP+4: 33 S. James Rd 3rd Floor Columbus Ohio 43213

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: William Geary, Esq.
Street, Apt. No.; or PO Box No.: Suite 101, 155 W. Main St.
City, State, ZIP+4: Columbus Ohio 43215

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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:

Benjamin S. Zacks, Esq.
Zacks Law Group LLC
The E. Building 3rd Floor
33 S. James Rd
Columbus Ohio 43213

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name): Marcus Dunn — C. Date of Delivery: 6-7

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3522 8820

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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:

William Geary, Esq.
Suite 101
155 W. Main Street
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Edna Gobble — C. Date of Delivery: 6/7/07

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3522 8837

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0810 0002 3522 8783

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Melanie Cornelius, Esq.
Street, Apt. No.; or PO Box No.: Sr. Asst. Attorney General, 150 E. Gay St. 21st Floor
City, State, ZIP+4: Collection Enforcement, Columbus Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 8790

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Christopher Yates, Esq.
Street, Apt. No.; or PO Box No.: Assistant US Attorney, 303 Marconi Blvd, 2nd Floor
City, State, ZIP+4: Columbus, Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Melanie Cornelius, Esq.
Sr. Asst. Attorney General
150 E. Gay St. 21st Floor
Collection Enforcement
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Steve Atkins ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

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

JUN 08 2007

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0810 0002 3522 8783

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

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:

Christopher Yates, Esq.
Assistant US Attorney
303 Marconi Blvd, 2nd Floor
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X RL Castle ☐ Agent ☐ Addressee

B. Received by (Printed Name) RL Castle | 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 ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0810 0002 3522 8790

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0810 0002 3525 0579

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Amelia A. Bower, Esq.
Street, Apt. No.; or PO Box No.: David L. VanSlyke, Esq. Plunkett & Cooney, Pc.
City, State, ZIP+4: 300 E. Broad St. 590 Columbus Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 8776

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Austin B. Barnes, III, Esq.
Street, Apt. No.; or PO Box No.: 5601 Hudson Drive
City, State, ZIP+4: Hudson Ohio 44236

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Amelia A. Bower, Esq.
David L. VanSlyke, Esq.
Plunkett & Cooney PC
300 E. Broad St, 590
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): D. Stofner — C. Date of Delivery: 6-7-07

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

3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3525 0579

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

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:

Austin B. Barnes, III, Esq.
5601 Hudson Dr.
Hudson, Ohio 44236

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name): Tony L. Hausch — C. Date of Delivery: 6-9-2007

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

HUDSON OH 44236 JUN - 8 2007

3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3522 8776

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0810 0002 3525 0555

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Michael J. Barren, Esq.
Street, Apt. No.; or PO Box No.: 110 Polaris Parkway, St. 302
City, State, ZIP+4: Westerville, Ohio 43082

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0562

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Rachel J. Mason, Esq.
Street, Apt. No.; or PO Box No.: 11340 Montgomery Rd. St. 210
City, State, ZIP+4: Cincinnati, Ohio 45249

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Michael J. Barren, Esq.
110 Polaris Parkway, St. 302
Westerville, Ohio 43082

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X R. Meadows ☐ Agent ☐ Addressee

B. Received by (Printed Name): R. Meadows C. Date of Delivery: 6-11

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3525 0555

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

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:

Rachel J. Mason, Esq.
11340 Montgomery Rd. St. 210
Cincinnati, Ohio 45249

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Sarah Hoskins ☐ Agent ☐ Addressee

B. Received by (Printed Name): Sarah Hoskins 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 ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0810 0002 3525 0562

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0810 0002 3525 0531

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: William R. Yost
Street, Apt. No.; or PO Box No.: Attorney at Law Carlile Patchen Murphy
City, State, ZIP+4: 366 E. Broad Street Columbus, Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0548

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Keith A. Kavinsky, Esq.
Street, Apt. No.; or PO Box No.: 8740 Orion Place, St. 200
City, State, ZIP+4: Columbus Ohio 43240

PS Form 3800, June 2002 — See Reverse for Instructions

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:

William R. Yost
Attorney at Law
Carlile Patchen Murphy
366 East Broad Street
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): [illegible] C. Date of Delivery

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

JUN 12 2007

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0810 0002 3525 0531

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

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:

Keith A. Kavinsky, Esq.
8740 Orion Place, St. 200
Columbus, Ohio 43240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Penny Patten ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6-7-07

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☒ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0810 0002 3525 0548

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0810 0002 3525 0517

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Krishna K. Velayudhan
Street, Apt. No.; or PO Box No.: 471 E. Broad St, 12th Floor P.O. Box 15069
City, State, ZIP+4: Columbus, Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0524

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Robert K. Hogan
Street, Apt. No.; or PO Box No.: Javitch Block Rathbone 602 Main St. Suite 300
City, State, ZIP+4: Cincinnati, Ohio 45202

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Krishna K. Velayudhan
471 E. Broad St. 12th Floor
P.O. Box 15069
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): [signature] C. Date of Delivery: 6-7-07

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0810 0002 3525 0517

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

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:

Robert K. Hogan
Javitch Block Rathbone
602 Main St.
Suite 300
Cincinnati, Ohio 45202

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): K. FIELDS C. Date of Delivery: 6-7

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0810 0002 3525 0524

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0810 0002 3525 0098

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To Shirley A. Cochran, Esquire
Street, Ap or PO Bo 2897 Liberty Bell Lane
City, Stat Reynoldsburg, OH 43068-3930

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0104

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent Ms. Barbara A. Morgan
Stree or PC 5758 Hartford St.
City, Worthington, OH 43085

PS Form 3800, June 2002 See Reverse for Instructions

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 that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Shirley A. Cochran, Esquire
2897 Liberty Bell Lane
Reynoldsburg, OH 43068-3930

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Shirley Cochran ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C. Date of Delivery 6/1/07

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0810 0002 3525 0098

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0810 0002 3525 0159

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Ms. Elizabeth N. Smith
Street, Apt. or PO Box
182 CL Smith Road
City, State,
Early Branch, SC 29916

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0142

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Ms. Janet Moore
Street, Ap
81 Pleasantview Drive
or PO Bo
City, State
Blacklick, Ohio 43004

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0173

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Mr. Reuben D. Nicola
Street, A
or PO Bo
7777 Tarboro Road
City, Sta
Ridgeland, SC 29936

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0166

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Ms. Heather Nicola Sandstrom
Street, Apt. N
or PO Box N
29 Frederick Street
City, State, Z
Rincon, GA 31326

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0128

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Mr. Joseph W. Lambert
Street, A
or PO Bo
514 Oak Street
City, Sta
Marion, OH 43302

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0180

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To Ms. Joyce Ann Kieait
Street, Apt. No.; or PO Box No. 1125 East Milada Dr.
City, State, ZIP+4 Phoenix Arizona 85042

PS Form 3800, June 2002 See Reverse for Instructions

7004 0810 0002 3529 0135

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Scott A. Wolf, Esquire
FIRESTONE BREHM HANSON
WOLF & BURCHINAL, LLP

Street, Apt. or PO Box
15 West Winter Street

City, State
Delaware, OH 43015

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0210

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Street, Ap
or PO Bo
City, State

David W. Cliffe, Esquire
Weltman Weinberg Reis
Ste. 800, 525 Vine St.
Cincinnati, OH 45273-9138

PS Form [illegible] See Reverse for Instructions

7006 0810 0002 3525 0203

U.S. Postal Service™
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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Street, Apt.
or PO Box
City, State,

Jay E. Michael, Esquire
729 S. Front St.
Columbus, OH 43206-1013

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0197

U.S. Postal Service™
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For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Street, Apt. N
or PO Box N
City, State, Z

James W. Wheeler, Esquire
Christopher G. Phillips, Esquire
300 Spruce Street, Floor One
Columbus, OH 43215

PS Form 380

7006 0810 0002 3525 1156

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Forest

Sent To
Terry L. Thomas, Esquire
Street, Apt. or PO Box
Thomas Law Group, L.P.A.
5148 Blazer Parkway, Suite A
City, State,
Dublin, OH 43017

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1224

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mrs. Marjorie S. Pearson
Street, Apt. or PO Box
3455 Smiley Road
City, State,
Hilliard, Ohio 43026-9384

PS Form 3800, June 2002 — See Reverse for Instructions

7004 0810 0002 3525 2134

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here: Thomas

Sent To: The Holy Land Christian Mission International
Street, Apt. or PO Box: 2000 East Red Bridge Road
City, State: P.O. Box 219055 Kansas City, MO 64121

PS Form 3800, June 2002 — See Reverse for Instructions

7004 0810 0002 3525 1149

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OFFICIAL USE

Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Mr. Daun H. Forester, II
Street, Apt. or PO Box: 4924 Dunkerrin Court
City, State: Dublin, OH 43017

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7006 0810 0002 3525 0118

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here
Thomas

Sent To: Erika J. Schoenberger, Esquire
Street, Apt. No. or PO Box: FROST BROWN TODD, LLC
City, State: 10 West Broad Street, Suite 2300
Columbus, Ohio 43215-3467

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0125

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Thomas

Sent To: The American Red Cross
Street, Apt. No.; or PO Box No.: 195 E. Broad Street
City, State, ZIP+4: Columbus, Ohio 43205

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7006 0810 0002 3525 1095

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here: Thomas

Sent To: ames M. McDonald, Treasurer
Street, Ap or PO Bo: St. Labre Indian School
City, State: .O. Box 216
Ashland, MT 59003

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7006 0810 0002 3525 1101

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here: Thomas

Sent To: ames M. Moore, Esquire
Street, Ap or PO Bo: INDHORST & DREIDAME
12 Walnut Street, Suite 3100
City, Stat: Cincinnati, Ohio 45202-4048

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1071

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Thomas

Sent To
Heartland Victorian Village
Street, Apt. or PO Box: 120 Thurber Drive W.
City, State: Columbus, Ohio 43215

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7006 0810 0002 3525 1088

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Thomas

Sent To
Altrusa International, Inc.
Street, Apt. or PO Box: 332 South Michigan Avenue, Suite 1123
City, State: Chicago, IL 60604

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7006 0810 0002 3525 1057

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here
Thomas

Sent To: Charles E. Ticknor, III, Esquire
Street, Apt. or PO Box: 91 W. Nationwide Blvd.
City, State: P.O. Box 151120
Columbus, OH 43215-8120

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 1064

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Thomas

Sent To: R. Lamont Kaiser, Esquire
Street, Apt. or PO Box: 15 W. Central Avenue
City, State: P.O. Box 1340
Delaware, Ohio 43015-8340

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7006 0810 0002 3525 1033

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Thomas

Sent To: DINSMORE & SHOHL LLP
Street, Apt. or PO Box: 255 E. Fifth Street, Suite 1900
City, State: Cincinnati, Ohio 45202

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7006 0810 0002 3525 1040

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Thomas

Sent To: Diane J. Kondor
Street, Apt. or PO Box: Assistant Attorney General
City, State: 50 East Gay Street, 23rd Floor
Columbus, Ohio 43215-3130

PS Form 3800 — See Reverse for Instructions

7006 0810 0002 3525 1019

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Thomas

Sent To The Wilderness Society
Street, Apt. N 901 Pennsylvania Avenue
or PO Box N
City, State, Z Washington, DC 20006

PS Form 3800, June 2002 See Reverse for Instructions

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Thomas

Sent To College of Human Ecology
The Ohio State University
Street, A 1787 Neil Avenue
or PO Bc
City, Stai Columbus, Ohio 43210-1295

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7006 0810 0002 3525 0999

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To: Mr. Kent M. Smith
Street, Apt. or PO Box: 3830 Tayport Drive
City, State: Dublin, OH 43017

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1002

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Sent To: The National Audubon Society
Street, Apt. or PO Box: 700 Broadway
City, State, Z: New York, New York 10003

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7006 0810 0002 3525 0975

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
O'Donnell

Sent To: Mr. Tristan A. McCormick
Street, Apt. No., or PO Box No.: c/o National City Bank
55 E. Broad St. – 1st Floor
City, State, ZIP+4: Locator 16-0012
Columbus, OH 43251-0012

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0982

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here
Kimmerle

Sent To: David E. Kauffman, Esquire
Street, Apt. No., or PO Box No.: 250 West Street
City, State, ZIP+4: Columbus, OH 43215

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7006 0810 0002 3525 0964

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mr. Delbert Mason
Street, Apt. or PO Box
4025 Hennaway
City, State
Columbus, OH 43228

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0968

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Ms. Paula Mason
Street, Apt. or PO Box
3432 Birch Street
City, State
Grove City, Ohio 43123

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0937

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To Ms. Taira Lambert
Street, Apt. or PO Box 3956 Laurel Lane
City, State Columbus, OH 43232

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0944

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To Mr. Richard E. MacWood
Street, Apt. or PO Box 5808 Abbey Church Road
City, State Dublin, OH 43017-1597

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7006 0810 0002 3525 1255

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Pole

Sent To
Street, Apt. N
or PO Box N
City, State, Z

Long Beach Mortgage Company
230 Stoneridge Mall Road
Pleasanton, CA 94588

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0920

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here
Howell

Sent To
Street, Apt.
or PO Box N
City, State,

Ms. Billie H. Stone
5709 Saranac Drive
Columbus, OH 43232

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0371

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here
Pre

Sent To: Raymond Parello, Esquire
Street, Apt. or PO Box: Asst. Prosecuting Attorney
City, State: 73 S. High St.
Columbus, OH 43215

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0395

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Pre

Sent To: First Union National Bank Trustee
Street, Apt. or PO Box: P.O. Box 2026
City, State: Flint, MI 48501-2026

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7006 0810 0002 3525 0388

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Pe

Sent To: Fidelity National Tax Service
Street, Apt. No. or PO Box No.: Lenders Service, Inc.,
3100 New York Drive
City, State, ZIP: Pasadena, CA 91107-1501

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Pe

Sent To: Equity Resources, Inc.
C/o Edward L. Rizor, Jr.
Street, Ap. or PO Bo: Statutory Agent
City, Stat: 25 ½ South Park Place
Newark, OH 43055

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7006 0810 0002 3525 0906

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Pre

Sent To: John W. Becker, Esquire
Paul W. Lombardi, Esquire
Street, Apt. or PO Box: Roetzel & Andress, LPA
City, State: 222 South Main Street
Akron, OH 44308

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0944

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

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Pre

Sent To: F. Peter Costello, Esquire
Reimer, Lorber & Arnovitz Co., LPA
Street, Apt. or PO Box: 4450 Edison Blvd.
City, State: PO Box 968
Twinsburg, OH 44087

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7006 0810 0002 3525 0357

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To: Mr. Rod Poe
Street, Apt. No. or PO Box No.: 120 Reis St.
City, State, ZIP+4: Columbus, OH 43224

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7006 0810 0002 3525 0340

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: Ms. Gabrielle McClaren
Street, Apt. No. or PO Box No.: aka Gabrielle Poe
City, State, ZIP+4: 7 Tewksbury Circuit in Theodore, Australia 29506

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7006 0810 0002 3525 0326

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Downs

Sent To
John K. Everett
Attorney at Law
Street, A
or PO Bo
1005 South High Street
City, Sta
Columbus, OH 43206

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7006 0810 0002 3525 0333

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Downs

Sent To
Mr. Mark Fullerton
Street, Apt. N
or PO Box N
669 Highland Dr.
City, State, Z
Columbus, OH 43214

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0319

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mr. James R. Bitonte
Street, Apt. N
or PO Box N
4044 Riverside Dr.
City, State, Z
Columbus, OH 43220

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0302

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mr. A. Joseph Bitonte
Street, Ap
or PO Box
2052 Honeytree Loop
City, State
Columbus, OH 43229

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0265

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here

Sent To
Kerra Handforth
Street, Apt. No.; or PO Box No.
c/o John H. Handforth
2701C S. 257th Place
City, State, ZIP+4
Kent, WA 98032

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0272

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here

Sent To
John H. Handforth
Street, Apt. No.; or PO Box No.
2701C S. 257th Place
City, State, ZIP+4
Kent, WA 98032

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0289

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here

Sent To: Mr. John D. Phillips, III
Street, Apt. or PO Box: 422 Fairwood Dr.
City, State: Pinckey, MI 48169

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7006 0810 0002 3525 0296

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Phillips

Sent To: Ms. Angela P. Snapp
Street, Apt. or PO Box: 4228 Fairfax Dr.
City, State: Columbus, OH 43220

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0258

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

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Sent To
Ms. J. Anne Jones McTurner
Street, Apt. or PO Box No.
5463 Riverport Dr.
City, State, ZIP+4
Columbus, OH 43221

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0241

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To
Ms. Lucinda Jones-English
Street, Apt. or PO Box No.
5543 Morningside Ave.
City, State, ZIP+4
Dallas, TX 75206

PS Form 3800, June 2002 See Reverse for Instructions

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To: Mr. Louis P. Volpe, Jr.
Street, Apt. or PO Box: 7777 Feder Rd.
City, State: Galloway, OH 43119-8946

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Jensen

Sent To: Ms. Gertrude Scales
Street, Apt. or PO Box: 2735 Burnaby Drive
City, State: Columbus, OH 43209

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1163

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
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Sent To
Mr. Eric Leo Piper
Street, Ap 30 E. Weisheimer Rd.
or PO Bo
City, Stat Columbus, OH 43214

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Kevin A. Craine, Esquire
Street, Apt. N 2201 Riverside Dr.
or PO Box No
City, State, Z Columbus, OH 43221

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7006 0810 0002 3525 1187

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent To O. Ross Long, Esquire
Street, Apt. N or PO Box N 125 N. Sandusky St.
City, State, Z Delaware, OH 43015

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7006 0810 0002 3525 1194

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

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Sent
Stree or Pt 022 Upland Rd.
City, Vest Palm Beach, FL 33401

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7006 0810 0002 3525 1200

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Smith

Sent To
Ms. Amy Fisher Zamarelli
Street, Apt. No. or PO Box No. 3743 E. Market St., Apt. 207
City, State, ZIP Warren, OH 44484

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7006 0810 0002 3525 1217

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mr. William H. Smith
Street, Apt. No. or PO Box No. 9247 Limestone Place
City, State, ZIP College Park, MD 20740

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 1231

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Postage	$ 1.31
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.11

Postmark Here

Sent To
Ms. Heather Urban
Street, Apt. No.; or PO Box No. 6747 Winbarr Way
City, State, ZIP+4 Canal Winchester, OH 43110

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3522 0072

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Postage	$ 1.31
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.11

Postmark Here

Sent To
John K. Bartosz, JD, LL.M., CFP
Street, Apt. No.; or PO Box No. The Kingsbury Firm, LLC
250 N. Sunnyslope Rd., Ste. 300
City, State, ZIP+4 Brookfield, WI 53005

PS Form 3800, June 2002 See Reverse for Instructions

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:

Richard J. Lacivita
Shapiro & Felty LLP
Suite 400
1500 West Third St.
Cleveland, Ohio 44113

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) C. Date of Delivery 6/8

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

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from service label*) 7006 0810 0002 3522 8868

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Scott A. Wolf, Esquire
FIRESTONE BREHM HANSON
WOLF & BURCHINAL, LLP
15 West Winter Street
Delaware, OH 43015

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) C. Date of Delivery 6/13/07

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

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from service label*) 7006 0810 0002 3525 0135

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Edward F. Pelteson, Esq
Edward F. Pelteson Co. LPA
85 East Gay Street, Suite 404
Columbus, Ohio
43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Edward F. Pelteson ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) 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 ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from service label*) 7006 0810 0002 3525 0661

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0810 0002 3522 0084

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here

Sent To: Mrs. Frances Cordell
Street, Apt. or PO Box: 3945 Hedgewood Drive
City, State: Medina, OH 44256

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 0091

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Postage	$ .58
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.38

Postmark Here

Sent To: Ms. Carole J. Kimmerle
Street, Apt. or PO Box: 2980 Granada Hills Dr.
City, State: Columbus, OH 43231

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 0114

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here

Sent To: Ms. Catherine A. Nelson
Street, Apt. No. or PO Box No.: 4299 Secluded Wood Court
City, State, ZIP: Gahanna, OH 43230

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 0046

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$5.21

Postmark Here: Connissert

Sent To: Ms. Christy M. Laurin
Street, Apt. No. or PO Box No.: 732 Glenview Drive
City, State, ZIP: Howard, OH 43028

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3522 0121

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Canvasser

Sent To
Street, Apt. or PO Box
City, State,

Ms. Nancy R. Crawford
229 Little Cove Road
Sylva, NC 28779

PS Form 3800, June 2002 — See Reverse for Instructions

7007 0220 0004 6208 0972

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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here
Eb

Sent To
Street, Ap or PO Bo
City, State

Mr. Thomas A. Camm
63 Goings Lane, SW
Reynoldsburg, OH 43068

PS Form 3800, August 2006 — See Reverse for Instructions

7006 0810 0002 3522 0107

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.24

Postmark Here

Sent To
Street, Apt or PO Box
City, State,

Ms. Jonda Lacy
6113 Holywell Drive
Dublin, OH 43017

PS Form 3800, June 2002 — See Reverse for Instructions

7007 0220 0004 6208 0989

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Postage	$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.24

Postmark Here
Diff. a car

Sent To
Street, A or PO B
City, Sta

Mrs. JoAnne Crabb
8175 Sawmill Rd.
Powell, OH 43065

PS Form 3800, August 2006 — See Reverse for Instructions

7007 0220 0004 6208 0996

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mr. Dennis Dittiacur
Street, Ap or PO Bo 8834 Robinhood Circle
City, Sta Westerville, OH 43082

PS Form 3800, August 2006 See Reverse for Instructions

7007 0220 0004 6208 1009

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Dr. David L. Waite
Street, Apt or PO Box 2071 Charmingfare Street
City, State, Columbus, OH 43228-9685

PS Form 3800, August 2006 See Reverse for Instructions

7007 0220 0004 6208 1023

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mrs. Frances Cordell
Street, Ap
or PO Bo
3945 Hedgewood Drive
City, State
Medina, OH 44256

PS Form 3800, August 2006 See Reverse for Instructions

7007 0220 0004 6208 1016

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Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.21

Postmark Here

Sent To
Mr. Mark A. Weilbacher
Street, Ap
or PO Bo
2709 Wildwood Road
City, State
Minerva Park, OH 43231

PS Form 3800, August 2006 See Reverse for Instructions