THE SUPREME COURT OF OHIO

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 SUPPLEMENTAL 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
SEP 28 2007
CLERK OF COURT
SUPREME COURT OF OHIO

RESPONDENT'S SUPPLEMENTAL 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 supplement my affidavit of compliance filed herein on June 14, 2007, so as to continue to be in compliance with this court's May 16, 2007 order of suspension, a copy of which is attached hereto as Exhibit A.

1. Respondent previously 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. Submitted previously were copies of the white receipts kept for all such certified mail sent, and those green receipts which had been returned as of the date of that original filing. Respondent now supplements said affidavit with the additional green return receipts he has received since the filing of his affidavit of compliance on June 14, 2007, attached collectively as Exhibit B.

2. Respondent also previously 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. Submitted previously were copies of the white receipts kept for all such certified mail sent, and those green receipts which had been returned as of the date of that original filing. Respondent now supplements said affidavit with these additional green return receipts he has received since the filing of his affidavit of compliance on June 14, 2007, attached collectively as Exhibit B.

3. Respondent continues to retain and maintain a record of the various steps taken by respondent pursuant to this court's May 16, 2007 order.

4. Respondent has made additional 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.

5. In order to comply with this court's May 16, 2007 order respondent had reviewed his voluminous caseload and thought he had made the disclosures to all courts, clients, co-counsel and opposing counsel as required on all of his cases. A copy of court dockets showing many of these cases are attached hereto collectively as Exhibit C, and show open and closed cases. There are well in excess of 750 such cases in the Franklin county probate court alone.

It was recently brought to respondent's attention that he inadvertently overlooked one case in which he was named as co-counsel along with three other attorneys from his law firm. Respondent was not lead or trial counsel, and had no involvement at any time with this case. Respondent did not perform any legal

services in this case prior to his suspension, and has performed none since his suspension. He has had no contact with the client, opposing counsel, or the courts in this case, except to notify them of his suspension. Other attorneys in respondent's law firm continue to represent that client.

Once this oversight was called to respondent's attention he immediately notified the client and opposing counsel of his suspension and disqualification by certified U.S. mail, return receipt requested, and notified that court by pleading. A copy of the white certified mail vouchers for the mailing of these notices are attached hereto collectively as Exhibit D.

6. Respondent's address to receive communications continues to be at 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 27th day of September, 2007.

CYNTHIA L. NESSER
Notary Public, State of Ohio
My Commission Expires 02-27-10

Notary Public

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 27th day of September, 2007.

Bryan Johnson

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 3522 0121

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Restricted Delivery Fee (Endorsement Required)	
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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: Eblin

Sent To / Street, Apt. or PO Box / City, State:
Mr. Thomas A. Camm
63 Goings Lane, SW
Reynoldsburg, OH 43068

PS Form 3800, August 2006 — 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:

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

Canvasser

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): [illegible] B. Date of Delivery: 6-20-07

C. Signature: X ☐ Agent ☐ Addressee

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 (Copy from service label) 7006 0810 0002 3522 0121

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EXHIBIT B

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:

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

Eblin

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): THOMAS CAMM B. Date of Delivery: 6/18/07

C. Signature: X Thomas Camm ☐ Agent ☒ Addressee

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

USPS REYNOLDSBURG OH 43068 JUN 18 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 (Copy from service label) 7007 0220 0004 6208 0972

PS Form 3811, July 1999 — Domestic Return Receipt — 102595-00-M-0952

7006 0810 0002 3522 0107

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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. Jonda Lacy
Street, Apt or PO Box: 6113 Holywell Drive
City, State: Dublin, OH 43017

PS Form 3800, June 2002 — See Reverse for Instructions

7007 0220 0004 6208 0989

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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: Diff. addr

Sent To: Mrs. JoAnne Crabb
Street, A or PO B: 8175 Sawmill Rd.
City, Sta: Powell, OH 43065

PS Form 3800, August 2006 — 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:

Ms. Jonda Lacy
6113 Holywell Drive
Dublin, OH 43017

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6/15/07

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 0107

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

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:

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

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) JoAnne Crabb B. Date of Delivery 6-16-07

C. Signature
X JoAnne Crabb ☐ Agent ☐ Addressee

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 (Copy from service label) 7007 0220 0004 6208 0989

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7007 0220 0004 6208 0996

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

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Sent To
Street, Apt. or PO Box
City, State
Mr. Dennis Dittiacur
8834 Robinhood Circle
Westerville, OH 43082

PS Form 3800, August 2006 See Reverse for Instructions

7007 0220 0004 6208 1009

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

PS Form 3800, August 2006 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:

Mr. Dennis Dittiacur
8834 Robinhood Circle
Westerville, OH 43082

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)*
B. Date of Delivery 6/15/07
C. Signature
☐ Agent
☒ Addressee
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 *(Copy from service label)* 7007 0220 0004 6208 0996

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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:

Dr. David L. Waite
2071 Charmingfare Street
Columbus, OH 43228-9685

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☐ Agent
☒ Addressee
B. Received by *(Printed Name)*
C. Date of Delivery
JUN 15 2007
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)* 7007 0220 0004 6208 1009

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7007 0220 0004 6208 1023

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

Mrs. Frances Cordell
3945 Hedgewood Drive
Medina, OH 44256

PS Form 3800, August 2006 See Reverse for Instructions

7007 0220 0004 6208 1016

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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
Street, Apt. or PO Box
City, State

Mr. Mark A. Weilbacher
2709 Wildwood Road
Minerva Park, OH 43231

PS Form 3800, August 2006 See Reverse for Instructions

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- 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:

Mrs. Frances Cordell
3945 Hedgewood Drive
Medina, OH 44256

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Fran Cordell ☐ Agent ☐ Addressee

B. Received by (Printed Name) FRAN CORDELL
C. Date of Delivery 6-18-07

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)* 7007 0220 0004 6208 1023

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:

Mr. Mark A. Weilbacher
2709 Wildwood Road
Minerva Park, OH 43231

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

OAKLAND JUN 15 2007 8666

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)* 7007 0220 0004 6208 1016

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

7006 0810 0002 3522 0114

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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. 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: Canvasser

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

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:

Ms. Catherine A. Nelson
4299 Secluded Wood Court
Gahanna, OH 43230

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Catherine ☐ Agent ☐ Addressee

B. Received by (Printed Name): | C. Date of Delivery: 6-15-07

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 0114

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:

Ms. Christy M. Laurin
732 Glenview Drive
Howard, OH 43028

Canvasser

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): C. Laur | B. Date of Delivery: 7-2-07

C. Signature: X C. Laur ☐ Agent ☐ Addressee

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 (Copy from service label): 7006 0810 0002 3522 0046

PS Form 3811, July 1999 — Domestic Return Receipt — 102595-00-M-0952

7006 0810 0002 3525 0227

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

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0234

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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

Tenson

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

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:

Mr. Louis P. Volpe, Jr.
7777 Feder Rd.
Galloway, OH 43119-8946

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Tracy C. Farrill ☐ Agent ☐ Addressee

B. Received by (Printed Name): Tracy C. Farrill
C. Date of Delivery: 6/19/07

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 0227

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:

Ms. Gertrude Scales
2735 Burnaby Drive
Columbus, OH 43209

Tenson

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Gertrude Scales ☐ Agent ☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery: 6-19

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 0234

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

7006 0810 0002 3525 1163

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
Mr. Eric Leo Piper
Street, Apt. or PO Box
130 E. Weisheimer Rd.
City, State
Columbus, OH 43214

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 1170

U.S. Postal Service™
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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
Smith

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

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:

Mr. Eric Leo Piper
130 E. Weisheimer Rd.
Columbus, OH 43214

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Eric Piper ☐ 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 1163

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:

Kevin A. Craine, Esquire
2201 Riverside Dr.
Columbus, OH 43221

Smith

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X KSchuster ☐ Agent ☐ Addressee

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

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

Upper Arlington OH 43221 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 3525 1170

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

7006 0810 0002 3525 0258

U.S. Postal Service™
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OFFICIAL USE

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
Street, Apt. or PO Box
City, State,

Ms. J. Anne Jones McTurner
5463 Riverport Dr.
Columbus, OH 43221

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0241

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

OFFICIAL USE

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
Street, Ap
or PO Box
City, State

Ms. Lucinda Jones-English
5543 Morningside Ave.
Dallas, TX 75206

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:

Ms. Lucinda Jones-English
5543 Morningside Ave.
Dallas, TX 75206

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6/19/07

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 0241

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

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OFFICIAL USE

7006 0810 0002 3525 0326

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. No. or PO Box No.
City, State, ZIP+4

John K. Everett
Attorney at Law
1005 South High Street
Columbus, OH 43206

PS Form 3800, June 2002 See Reverse for Instructions

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OFFICIAL USE

7006 0810 0002 3525 0333

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. No. or PO Box No.
City, State, ZIP+4

Mr. Mark Fullerton
669 Highland Dr.
Columbus, OH 43214

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:

John K. Everett
Attorney at Law
1005 South High Street
Columbus, OH 43206

Dwns

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ 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 0326

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:

Mr. Mark Fullerton
669 Highland Dr.
Columbus, OH 43214

Dwns

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6-14-07

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

JUN 14 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 0333

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

7006 0810 0002 3525 0319

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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. N or PO Box N
City, State, Z

Mr. James R. Bitonte
4044 Riverside Dr.
Columbus, OH 43220

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0302

U.S. Postal Service™
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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
Street, Ap or PO Box
City, State

Mr. A. Joseph Bitonte
2052 Honeytree Loop
Columbus, OH 43229

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:

Mr. James R. Bitonte
4044 Riverside Dr.
Columbus, OH 43220

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C. Date of Delivery 6-14-07

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

COLUMBUS OH 43220-9998 JUN 14 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 3525 0319

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:

Mr. A. Joseph Bitonte
2052 Honeytree Loop
Columbus, OH 43229

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ 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

A. Joseph Bitonte

JUN 15 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 0302

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

7006 0810 0002 3525 0289

U.S. Postal Service™
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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. John D. Phillips, III
Street, Apt. or PO Box 422 Fairwood Dr.
City, State, Pinckey, MI 48169

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0296

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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 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

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:

Mr. John D. Phillips, III
422 Fairwood Dr.
Pinckey, MI 48169

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) John Phillips
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 0289

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:

Ms. Angela P. Snapp
4228 Fairfax Dr.
Columbus, OH 43220

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Angela P. Snapp ☐ Agent ☐ Addressee

B. Received by (Printed Name) Angela P. Snapp
C. Date of Delivery 6-20-07

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 0296

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

7006 0810 0002 3525 0975

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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
O'Donnell

Sent To Mr. Tristan A. McCormick
Street, Apt. No., or PO Box No. c/o National City Bank
155 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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OFFICIAL USE

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

Kimmerle
Postmark Here
Thomas

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

Mr. Tristan A. McCormick
c/o National City Bank
155 E. Broad St. – 1st Floor
Locator 16-0012
Columbus, OH 43251-0012

O'Donnell

2. Article Number (Transfer from service label) 7006 0810 0002 3525 0975

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Larry Bolyard ☐ Agent ☐ Addressee

B. Received by (Printed Name) LARRY Bolyard C. Date of Delivery JUN 15 2007

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

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:

David E. Kauffman, Esquire
250 West Street
Columbus, OH 43215

Kimmerle / Thomas

2. Article Number (Transfer from service label) 7006 0810 0002 3525 0982

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) D. Kauffman 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

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

7006 0810 0002 3525 0937

U.S. Postal Service™
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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 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

U.S. Postal Service™
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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. Richard E. MacWood
Street, Apt. or PO Box 5808 Abbey Church Road
City, State Dublin, OH 43017-1597

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:

Ms. Taira Lambert
3956 Laurel Lane
Columbus, OH 43232

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Taira Lambert ☐ Agent ☒ Addressee

B. Received by (Printed Name) TAIRA LAMBERT
C. Date of Delivery 6-16-07

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 0937

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:

Mr. Richard E. MacWood
5808 Abbey Church Road
Dublin, OH 43017-1597

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Peggy MacWood ☐ Agent ☐ Addressee

B. Received by (Printed Name) Peggy MacWood
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 0944

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

7006 0810 0002 3525 1255

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
Long Beach Mortgage Company
Street, Apt. N or PO Box No. 6230 Stoneridge Mall Road
City, State, Z Pleasanton, CA 94588

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0920

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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
Ms. Billie H. Stone
Street, Apt. No. or PO Box No. 5709 Saranac Drive
City, State, Z Columbus, OH 43232

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:

Long Beach Mortgage Company
6230 Stoneridge Mall Road
Pleasanton, CA 94588

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery JUN 20 2007

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 1255

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:

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Ms. Cynthia L. Stone ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ms. Cynthia L. Stone 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 0920

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

7006 0810 0002 3525 0371

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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
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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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
Pre

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

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:

Raymond Parello, Esquire
Asst. Prosecuting Attorney
373 S. High St.
Columbus, OH 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X M L Ebron ☐ 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 0371

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:

First Union National Bank Trustee
P.O. Box 2026
Flint, MI 48501-2026

Pre

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Randall Cook ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
JUN 20 2007

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 0395

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

7006 0810 0002 3525 0388

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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

Pre

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

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0413

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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

Pre

Sent To: Equity Resources, Inc.
C/o Edward L. Rizor, Jr.
Street, Apt. No. or PO Box No.: Statutory Agent
City, State, ZIP: 25 ½ South Park Place
Newark, OH 43055

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:

Fidelity National Tax Service
Lenders Service, Inc.,
3100 New York Drive
Pasadena, CA 91107-1501

Pre

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery JUN 19 2007

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 0388

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:

Equity Resources, Inc.
C/o Edward L. Rizor, Jr.
Statutory Agent
25 ½ South Park Place
Newark, OH 43055

Pre

NEWARK, OH 43055 JUN 15 2007 USPS

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Angie Caughenbaugh ☐ Agent ☒ Addressee

B. Received by (Printed Name) Angie Caughenbaugh 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 0413

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

7006 0810 0002 3525 0906

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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

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 0364

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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

Pre

Sent To: F. Peter Costello, Esquire
Reimer, Lorber & Arnovitz Co., LPA
Street, Apt. or PO Box: 2450 Edison Blvd.
City, State: PO Box 968
Twinsburg, OH 44087

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:

John W. Becker, Esquire
Paul W. Lombardi, Esquire
Roetzel & Andress, LPA
222 South Main Street
Akron, OH 44308

Pre

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Bill Moretti-8 C. Date of Delivery: JUN 2007

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 0906

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:

F. Peter Costello, Esquire
Reimer, Lorber & Arnovitz Co., LPA
2450 Edison Blvd.
PO Box 968
Twinsburg, OH 44087

Pre

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name): S. FORSCH C. Date of Delivery: 6-18-07

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 0364

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

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, Apt. or PO Box
City, State

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

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0203

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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

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:

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Audrey Rice ☐ 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

CINCINNATI MID CITY STA
JUN 18 2007
45202

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 0210

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:

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ 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 0203

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

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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. 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 38

7006 0810 0002 3525 0197

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:

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☒ Addressee

B. Received by (Printed Name) 6-15-07
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 0197

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

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

Fores

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

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

Mrs. Marjorie S. Pearson
3455 Smiley Road
Hilliard, Ohio 43026-9384

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:

Terry L. Thomas, Esquire
Thomas Law Group, L.P.A.
5148 Blazer Parkway, Suite A
Dublin, OH 43017

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name): Heather Cook
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 1156

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:

Mrs. Marjorie S. Pearson
3455 Smiley Road
Hilliard, Ohio 43026-9384

E. Herm

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Marjorie Pearson ☐ Agent ☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery 6/15/07

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 lat 7006 0810 0002 3525 1224

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

7006 0810 0002 3525 1132

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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 P.O. Box 219055
City, State: Kansas City, MO 64121

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 1149

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

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:

The Holy Land Christian
Mission International
2000 East Red Bridge Road
P.O. Box 219055
Kansas City, MO 64121

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature X ☐ Agent ☐ Addressee

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

JUN 18 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 (Copy from service label) 7006 0810 0002 3525 1132

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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:

Mr. Daun H. Forester, II
4924 Dunkerrin Court
Dublin, OH 43017

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature X ☐ Agent ☐ Addressee

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

JUN 21 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 (Copy from service label) 7006 0810 0002 3525 1149

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

7006 0810 0002 3525 1118

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OFFICIAL USE

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: Erika J. Schoenberger, Esquire
Street, Apt. or PO Box: FROST BROWN TODD, LLC
City, State: 10 West Broad Street, Suite 2300
Columbus, Ohio 43215-3467

PS Form 3800, June

7006 0810 0002 3525 1125

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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 American Red Cross
Street, Apt. No.; or PO Box No.: 995 E. Broad Street
City, State, ZIP+4: Columbus, Ohio 43205

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:

Erika J. Schoenberger, Esquire
FROST BROWN TODD, LLC
10 West Broad Street, Suite 2300
Columbus, Ohio 43215-3467

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): Erika Richardson
B. Date of Delivery
C. Signature: X
☐ Agent
☐ Addressee
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 (Copy from service label) 7006 0810 0002 3525 1118

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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:

The American Red Cross
995 E. Broad Street
Columbus, Ohio 43205

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)
B. Date of Delivery
C. Signature: X Kepler
☐ Agent
☒ Addressee
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

COLUMBUS OH 43205-9998 NOV 18 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 (Copy from service lat 7006 0810 0002 3525 1125

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

7006 0810 0002 3525 1095

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OFFICIAL USE

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

PS Form 3800, June 2002

7006 0810 0002 3525 1101

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OFFICIAL USE

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

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:

James M. McDonald, Treasurer
St. Labre Indian School
P.O. Box 216
Ashland, MT 59003

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)*: Shawn Biamas
B. Date of Delivery:
C. Signature: X Shawn Biamas ☒ Agent ☐ Addressee
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 *(Copy from service label)* 7006 0810 0002 3525 1095

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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:

James M. Moore, Esquire
LINDHORST & DREIDAME
312 Walnut Street, Suite 3100
Cincinnati, Ohio 45202-4048

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)*:
B. Date of Delivery:
C. Signature: X Jennifer L. Little J. Little ☐ Agent ☐ Addressee
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

CINCINNATI OH MID CITY STA JUN 16 2007 USPS 45203

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 *(Copy from service lal* 7006 0810 0002 3525 1101

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

7006 0810 0002 3525 1071

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OFFICIAL USE

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
Heartland Victorian Village
Street, Apt. or PO Box: 920 Thurber Drive W.
City, State: Columbus, Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1088

U.S. Postal Service™
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OFFICIAL USE

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

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:

Heartland Victorian Village
920 Thurber Drive W.
Columbus, Ohio 43215

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature
X [signature] ☐ Agent ☒ Addressee

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

COLUMBUS OH MACF
JUN 15 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 *(Copy from service label)* 7006 0810 0002 3525 1071

PS Form 3811, July 1999 — Domestic Return Receipt — 102595-00-M-0952

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:

Altrusa International, Inc.
332 South Michigan Avenue, Suite 1123
Chicago, IL 60604

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery
X Rebecca Mis 6-16-07

C. Signature
X Rebecca Mis ☐ Agent ☐ Addressee

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 *(Copy from service label)* 7006 0810 0002 3525 1088

PS Form 3811, July 1999 — Domestic Return Receipt — 102595-00-M-0952

7006 0810 0002 3525 1057

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OFFICIAL USE

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: Charles E. Ticknor, III, Esquire
Street, Apt. or PO Box: 191 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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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: L. Lamont Kaiser, Esquire
Street, Apt. or PO Box: 5 W. Central Avenue
City, State: P.O. Box 1340 Delaware, Ohio 43015-8340

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:

Charles E. Ticknor, III, Esquire
191 W. Nationwide Blvd.
P.O. Box 151120
Columbus, OH 43215-8120

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name): Christy McCarthy
C. Date of Delivery: 6/15/07

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 1057

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:

Lamont Kaiser, Esquire
W. Central Avenue
O. Box 1340
laware, Ohio 43015-8340

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): L. KAISER
B. Date of Delivery: 6/15/07

C. Signature
X [signature] ☐ Agent ☐ Addressee

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 (Copy from service label) 7006 0810 0002 3525 1064

PS Form 3811, July 1999 — Domestic Return Receipt — 102595-00-M-0952

7006 0810 0002 3525 1033

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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: Timothy A. Tepe, Esquire
Street, Apt. or PO Box: DINSMORE & SHOHL LLP
City, State: 255 E. Fifth Street, Suite 1900
Cincinnati, Ohio 45202

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1040

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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: Diane J. Kondor
Street, Apt. or PO Box: Assistant Attorney General
City, State: 150 East Gay Street, 23rd Floor
Columbus, Ohio 43215-3130

PS Form 3800 — 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:

Timothy A. Tepe, Esquire
DINSMORE & SHOHL LLP
255 E. Fifth Street, Suite 1900
Cincinnati, Ohio 45202

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Signature: Jon F Crosby ☐ Agent ☐ Addressee

B. Received by (Printed Name): JON F CROSBY C. Date of Delivery

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

JUN 16 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 1033

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:

Diane J. Kondor
Assistant Attorney General
150 East Gay Street, 23rd Floor
Columbus, Ohio 43215-3130

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X ☐ 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 18 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 1040

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

7006 0810 0002 3525 1019

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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 Wilderness Society
Street, Apt. No. or PO Box No.: 901 Pennsylvania Avenue
City, State, ZIP+4: Washington, DC 20006

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1026

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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: College of Human Ecology
The Ohio State University
Street, Apt. No. or PO Box No.: 1787 Neil Avenue
City, State, ZIP+4: Columbus, Ohio 43210-1295

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:

The Wilderness Society
1901 Pennsylvania Avenue
Washington, DC 20006

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X A Gross ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
6-2007

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 1019

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:

College of Human Ecology
The Ohio State University
1787 Neil Avenue
Columbus, Ohio 43210-1295

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kathy Shonkwiler ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
KATHY SHONKWILER 6/15/07

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

COLUMBUS OHIO INTERCHANGE STATION 43210
JUN 15 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 3525 1026

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

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
Street, Apt. No. or PO Box No.
City, State, ZIP+4

Mr. Reuben D. Nicola
7777 Tarboro Road
Ridgeland, SC 29936

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0166

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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
Street, Apt. No. or PO Box No.
City, State, ZIP+4

Ms. Heather Nicola Sandstrom
29 Frederick Street
Rincon, GA 31326

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:

Mr. Reuben D. Nicola
7777 Tarboro Road
Ridgeland, SC 29936

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Reuben Nicola
C. Date of Delivery: 6-18-07

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 0173

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:

Ms. Heather Nicola Sandstrom
29 Frederick Street
Rincon, GA 31326

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): LORI NESBIT
C. Date of Delivery: 6-21-07

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 0166

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

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
514 Oak Street
Marion, OH 43302

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0180

U.S. Postal Service™
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OFFICIAL USE

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

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:

Mr. Joseph W. Lambert
514 Oak Street
Marion, OH 43302

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Joseph Lambert — C. Date of Delivery 6-22-07

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 0128

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

See attached
Joyce's returned 8-3-07

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

CERTIFIED MAIL

7006 0810 0002 3525 0180

$5.380

Mailed From 43215

Ms. Joyce Ann Kievit
1125 East Milada Drive
Phoenix, AZ 85042

N/C

UNCLAIMED

NIXIE

850 1E 1

RETURN TO SENDER

7006 0810 0002 3525 0159

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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
Street, Apt. or PO Box
City, State,

Ms. Elizabeth N. Smith
182 CL Smith Road
Early Branch, SC 29916

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0142

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CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com®

OFFICIAL USE

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
Street, Ap
or PO Bo
City, Stat

Ms. Janet Moore
81 Pleasantview Drive
Blacklick, Ohio 43004

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:

Ms. Elizabeth N. Smith
182 CL Smith Road
Early Branch, SC 29916

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Joseph Smith ☑ Agent ☐ Addressee

B. Received by (*Printed Name*) Joseph Smith
C. Date of Delivery 6-15-07

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 0159

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

See attachment 7/2/07
Janet's returned

CERTIFIED MAIL™

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 0142

045J83067794
$5.380
06/12/2007
Mailed From 43215
US POSTAGE
neopost

Ms. Janet Moore
81 Pleasantview Drive
Blacklick, Ohio 43004

Motion 6-13 mgs
6-23
6/28 Ret

NIXIE 430 DE 1 08 06/30/07
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 43215370001 *0746-07900-30-27

7006 0810 0002 3525 0098

U.S. Postal Service™
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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, Apt. or PO Box: 2897 Liberty Bell Lane
City, State: Reynoldsburg, OH 43068-3930

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0104

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OFFICIAL USE

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. Barbara A. Morgan
Street, Apt. or PO Box: 5758 Hartford St.
City, State: 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 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:

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: 6-16-07

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

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:

Ms. Barbara A. Morgan
5758 Hartford St.
Worthington, OH 43085

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Barbara A Morgan ☐ Agent ☒ Addressee

B. Received by (Printed Name): Barbara A Morgan | C. Date of Delivery: 6-16-07

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 0104

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

7006 0810 0002 3525 0074

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OFFICIAL USE

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: 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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OFFICIAL USE

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: Janet Mikaci
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 label): 7006 0810 0002 3525 0074

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:

Ms. Janet Mikaci
7576 Watson Bay Ct.
Stone Mountain, GA
30087

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Janet Mikaci ☐ Agent ☐ Addressee

B. Received by (Printed Name): Janet Mikaci
C. Date of Delivery: 6-11-07

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 0111

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

EXHIBIT
B

7006 0810 0002 3525 0067

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OFFICIAL USE

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

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0081

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OFFICIAL USE

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: Paris M. Miller, Jr.
Street, Apt. No.; or PO Box No.: 4594 Crosscreek Dr.
City, State, ZIP+4: Columbus, Ohio 43232

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:

Lisa M. Miller
P.O. Box 47923
District Heights, MD
20753

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lisa Miller ☐ Agent ☐ Addressee

B. Received by (Printed Name): LISA Miller
C. Date of Delivery: 6-14-2007

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 0067

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

See attachment
Paris returned
6-29-07

CERTIFIED MAIL™

Gamble Hartshorn Johnson, LI
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 0081

045J83067794
$5.380
06/05/2007
Mailed From 43215
US POSTAGE
neopost

Paris M. Miller, Jr.
4894 Crosscreek Drive
Columbus, OI

NIXIE 430 4C 1 06 06/27/07
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 43215570001 *0746-06681-27-23

43215585700
43232416130 C021

7006 0810 0002 3525 0630

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OFFICIAL USE

Postage	$ .75
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.55

Postmark Here

Sent To: Raymond Parello, Esq.
Street, Apt. No.; or PO Box No.: Franklin County Prosecutor's Office 373 S High Street 14th Floor
City, State, ZIP+4: Columbus Ohio 43215

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0642

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Postage	$ .75
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 5.55

Postmark Here

Sent To: Joseph Budde, Sr. Esq.
Street, Apt. No.; or PO Box No.: 8136 Blind Brook Ct.
City, State, ZIP+4: Columbus, Ohio 43235

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:

Raymond Parello Esq.
Franklin County Prosecutor's Office
373 S. High St, 14th Floor
Columbus, Ohio 43215

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x M L Ebron
☐ Agent
☐ Addressee

B. Received by (Printed Name): M L Ebron
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 0630

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

See attachment 6/29/07
Joseph's returned

7006 0810 0002 3525 0647

Gamble Hartshorn, LLC
ATTORNEYS AT LAW

One East Livingston Avenue
Columbus, Ohio 43215-5700

TO:
JOSEPH E BUDDE, SR, ESQ.
ATTORNEY AT LAW
8136 BLIND BROOK CT
COLUMBUS, OH 43235

NIXIE 430 DE 1 06 06/29/07
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 43215570001 *2646-05779-29-31

43215@5700

7006 0810 0002 3525 0616

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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: Bruce A. Hurd
Street, Apt. No.; or PO Box No.: 2201 Crawford Rd.
City, State, ZIP+4: Columbus Ohio 43221

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 0623

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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: Scott Collister, Esq.
Street, Apt. No.; or PO Box No.: Javitch Block & Rathbone Suite 500
City, State, ZIP+4: 602 Main Street Cincinnati Ohio 45202

PS Form 3800, June 2002 — See Reverse for Instructions

See attached 7-9-07
Bruce's returned

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 Collister, Esq.
Javitch Block & Rathbone
Suite 500
602 Main Street
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

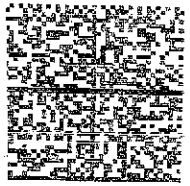
2. Article Number (Transfer from service label): 7006 0810 0002 3525 0623

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

CERTIFIED MAIL™

Gamble Hartshorn Johnson, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 0616



045J83067794
Postage $5.219
06/06/2007
Mailed From 43215
US POSTAGE

P.O Box

BRUCE H HURD
2201 CRANFORD ROAD
COLUMBUS, OH 43221

FINAL NOTICE

NIXIE 430 CE 1 06 07/06/07
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 43215570001 *1846-17501-06-35

U.S. Postal Service™
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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

7006 0810 0002 3525 0999

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

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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

7006 0810 0002 3525 1002

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

PS Form 3800, June 2002 See Reverse for Instructions

See attached 7-9-07
Kent's returned

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:

The National Audubon Society
700 Broadway
New York, New York 10003

Thomas

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R Lakes ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) C. Date of Delivery 6/18/07

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

JUN 18 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 3525 1002

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

CERTIFIED MAIL™

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 0999

045J83067794
$5.380
06/13/2007
Mailed From 43215
neopost
US POSTAGE

Mr. Kent M. Smith
8830 Tayport Drive
Dublin, OH 43017

NIXIE 430 SE 1 06 07/06/07
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 43215570001 *1446-21675-14-37

43017-4215@5700

7006 0810 0002 3525 0954

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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. Delbert Mason
Street, Ap or PO Bo 4025 Hennaway
City, Stat Columbus, OH 43228

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0968

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
Ms. Paula Mason
Street, or PO 3432 Birch Street
City, St Grove City, Ohio 43123

PS Form 3800, June 2002 See Reverse for Instructions

Delbert's returned (6-21-07)

See attached

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:

Ms. Paula Mason
3432 Birch Street
Grove City, Ohio 43123

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Paula Mason ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6-20

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 0968

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

CERTIFIED MAIL™

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 0951

045J8300704
$5.210
06/13/2007
Mailed From 43215
US POSTAGE
Postage

Mr. Delbert Mason
4025 Hennaway
Columbus, OH 43228

430 NAE 1 CDSC 06 06/20/07
RETURN TO SENDER
MASON
MOVED LEFT NO ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER
BC: 43215570001 *1745-05905-14-35

43228+6410
4321505700

7006 0810 0002 3525 0357

U.S. Postal Service™
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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. Rod Poe
Street, Apt. No. or PO Box No.: 120 Reis St.
City, State, Zip+4: Columbus, OH 43224

PS Form 3800, June 2002 See Reverse for Instructions

7006 0810 0002 3525 0340

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

PS Form 3800, June 2002 See Reverse for Instructions

Rod's returned 6-22-07
(See attached)

CERTIFIED MAIL™

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 0357

045J83067794
$5.21
06/13/2007
Mailed From 43215
US POSTAGE

Mr. Rod Poe
3120 Reis Street
Columbus, OH 43224

NIXIE 430 DE 1 00 06/21/07
RETURN TO SENDER
VACANT
UNABLE TO FORWARD
BC: 43215570099 *1446-17621-14-39

43224+4920 65700

7006 0810 0002 3522 0084

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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
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

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

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:

Ms. Carole J. Kimmerle
2980 Granada Hills Dr.
Columbus, OH 43231

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery 6/25

C. Signature
X
☑ Agent
☐ Addressee

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

JUN 25 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 *(Copy from service label)* 7006 0810 0002 3522 0091

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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OFFICIAL USE

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

7006 0810 0002 3525 7237

Sent To
Ms. Heather Urban
Street, Apt. or PO Box
6747 Winbarr Way
City, State
Canal Winchester, OH 43110

PS Form 3800, June 2002 See Reverse for Instructions

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OFFICIAL USE

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

7006 0810 0002 3522 0077

Sent To
John K. Bartosz, JD, LL.M., CFP
The Kingsbury Firm, LLC
Street, Apt. or PO Box
250 N. Sunnyslope Rd., Ste. 300
City, State
Brookfield, WI 53005

PS Form 3800, June 2002 See Reverse for Instructions

See attachment returned 7-9-07

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:

John K. Bartosz, JD, LL.M., CFP
The Kingsbury Firm, LLC
250 N. Sunnyslope Rd., Ste. 300
Brookfield, WI 53005

Pierce

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Debbie Krajewski ☒ Agent ☐ Addressee

B. Received by (Printed Name) Debbie Krajewski
C. Date of Delivery 6/18/07

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 0077

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

7006 0810 0002 3525 1231

Gamble Hartshorn, LLC
ATTORNEYS AT LAW

One East Livingston Avenue
Columbus, Ohio 43215-5700

TO:

Ms. Heather Urban
6747 Winbarr Way
Canal Winchester, OH 43110

L/N
6-15

☐ Not Deliverable As Addressed
Unable To Forward
☐ Insufficient Address
☐ Moved, Left No Address
☒ Unclaimed ☐ Refused
☐ Attempted – Not Known
☐ No Such Street ☐ Number
☐ Vacant ☐ Illegible
☐ No Mail Receptacle
☐ Box Closed – No Order
☐ Returned For Better Address
☐ Postage Due _____

2ND 6-25
RET 6-30

7006 0810 0002 3525 1200

U.S. Postal Service™
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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: 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

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1217

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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: 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

See attached
returned 7-9-07

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:

Mr. William H. Smith
9247 Limestone Place
College Park, MD 20740

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X William H. Smith ☐ 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 1217

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

CERTIFIED MAIL™

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

7006 0810 0002 3525 1200

$5.21

US POSTAGE

Ms. Amy Fisher Zamarelli
3743 E. Market St., Apt. 207
Warren, OH 44484

6-16-07

6-21

NIXIE 444 CE 1 01 07/03/07
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 43215570001 *1646-01013-14-35

7006 0810 0002 3525 1187

U.S. Postal Service™
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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: Smith

Sent To: O. Ross Long, Esquire
Street, Apt. No. or PO Box No.: 125 N. Sandusky St.
City, State, ZIP+4: Delaware, OH 43015

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0810 0002 3525 1194

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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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: Smith

Sent To: Ms. Marian English Huse
Street, Apt. No. or PO Box No.: 022 Upland Rd.
City, State, ZIP+4: West Palm Beach, FL 33401

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:

O. Ross Long, Esquire
125 N. Sandusky St.
Delaware, OH 43015

Smith

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X C. Hingsbergen ☐ Agent ☐ Addressee

B. Received by (Printed Name): C. HINGSBERGEN — C. Date of Delivery: 6-15-07

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 1187

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

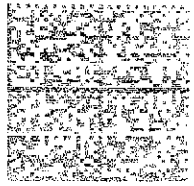
See attached 7-16-07

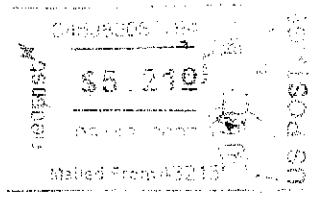
M. Huse returned

CERTIFIED MAIL™

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

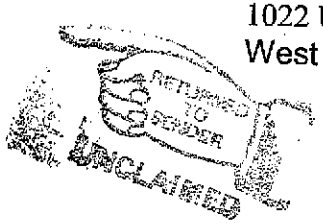
7006 0810 0002 3525 1194





CN 6-18

Ms. Marian English Huse
1022 Upland Rd.
West Palm Beach, FL 33401



Name Huse
1st Notice 6-18
2nd Notice 6-22
Return 7-3

7006 0810 0002 3525 0265

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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
Kerra Handforth
c/o 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 0272

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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
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

See attachments for both returned ~~6-19-07~~ 7-17-07

Gamble Hartshorn, LLC

ATTORNEYS AT LAW

One East Livingston Avenue
Columbus, Ohio 43215-5700

CERTIFIED MAIL™

7006 0810 0002 3525 0272

$5.21

Mailed From 43215

LN055

RETURN TO SENDER

☐ MOVED LEFT NO ADDRESS
☐ ATTEMPTED NOT KNOWN
☐ UNCLAIMED ☐ REFUSED
☐ NO SUCH STREET ☐ NUMBER
☐ BOX CLOSED NO ORDER
☐ INSUFFICIENT ADDRESS ☐ VACANT
☐ NO MAIL RECEPTACLE
☐ DO NOT REMAIL WITH THIS ENVELOPE
☐ NOT DELIVERABLE AS ADDRESSED
☐ UNABLE TO FORWARD

John H. Handforth
2701C S. 257th Place
Kent, WA 98032

NL 7/15/07

NIXIE 980 CC 1 01 07/14/07

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 43215570001 *1746-19590

Gamble Hartshorn, LLC
ATTORNEYS AT LAW
One East Livingston Avenue
Columbus, Ohio 43215-5700

CERTIFIED MAIL™

7006 0810 0002 3525 0265

045J83067794
$5.21
06/13/2007
Mailed From 43215
neopost
US POSTAGE

RETURN TO SENDER
LN065

☐ MOVED LEFT NO ADDRESS
☐ ATTEMPTED NOT KNOWN
☐ UNCLAIMED ☐ REFUSED
☐ NO SUCH STREET ☐ NUMBER
☐ BOX CLOSED NO ORDER
☐ INSUFFICIENT ADDRESS ☐ VACANT
☐ NO MAIL RECEPTACLE
☐ DO NOT REMAIL WITH THIS ENVELOPE
☐ NOT DELIVERABLE AS ADDRESSED
☐ UNABLE TO FORWARD

Kerra Handforth
c/o John H. Handforth
2701C S. 257th Place
Kent, WA 980

NL 7/15/7

NIXIE 980 DC 1 00 07/14/07
RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD
BC: 43215570099 *2473-22753-19-35

John O'Grady
Clerk of The Court of Common Pleas
373 South High Street, 23rd Floor
Columbus, OH 43215
(614) 462-3600

Appeals: 373 S. High St
Civil: 369 S. High St
Criminal: 369 S. High St
Domestic: 373 S. High St
Juvenile: 373 S. High St
Juvenile Traffic: 399 S. Front S

EXHIBIT
C

FRANKLIN COUNTY CLERK OF COURT

Home

Case Information Online

Court Schedule

Last Name JOHNSON First Name BRYAN Middle Int Court All Case CV Search

Advanced Search

CASE LISTING

CASE	NAME	M/F	P/D	D.O.B.	DESCRIPTION	FILED	STATUS
01 CV 009270	JOHNSON, BRYAN		DF		SARAH COWEN -VS- BRYAN JOHNSON	09/24/2001	CLOSED
06 CV 015551	JOHNSON, BRYAN		DF		DEUTSCHE BANK TRUST COMPANY AMERICAS -VS- BRYAN JOHNSON	11/28/2006	CLOSED
94 CV 008269	JOHNSON, BRYAN		DF		DORIS J CLARK -VS- BRYAN JOHNSON	11/21/1994	CLOSED
96 CV 008250	JOHNSON, BRYAN		DF		IN RE: FORFEITURE OF PERSONAL PROPERTY	10/29/1996	CLOSED
97 CV 007276	JOHNSON, BRYAN		PL		BRYAN JOHNSON -VS- ANGELA N DILLION	07/30/1997	CLOSED
05 CR 005379	JOHNSON, BRYAN	M	DF	03/07/1964	STATE OF OHIO -VS- BRYAN JOHNSON	08/11/2005	CLOSED
95 CV 000948	JOHNSON, BRYAN		NP		SOURCE ONE MORTGAGE SERVICES CORPORATION -VS- JAMES W PRIDGEON JR	02/08/1995	CLOSED
98 CV 005321	JOHNSON, BRYAN		PL		BRYAN JOHNSON ADMR -VS- APRIL BURKE	07/10/1998	CLOSED
01 CV 002397	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- LONGTERM LODGING INC	03/13/2001	CLOSED
03 CV 001451	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- LAWRENCE A BELSKIS	02/06/2003	CLOSED
04 CV 002722	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- LAWRENCE A BELSKIS IND	03/09/2004	REINSTATED
05 CV 012074	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- LAWRENCE A BELSKIS	10/31/2005	REINSTATED
87 CV 008179	JOHNSON, BRYAN B		DF		JAMES D COLLIVER -VS- BRYAN B JOHNSON	12/24/1987	CLOSED
87 CV 008180	JOHNSON, BRYAN B		DF		MARGARET W COLLIVER -VS- BRYAN B JOHNSON	12/24/1987	CLOSED
88 CV 008128	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- WILLIAM A PENCE	12/01/1988	CLOSED
90 CV 003759	JOHNSON, BRYAN B		DF		VICTORIA MORTGAGE COMPANY -VS- NANCY FLAHERTY	05/17/1990	CLOSED
91 CV 004751	JOHNSON, BRYAN B		DF		AMERICAS MORTGAGE COMPANY -VS- TIMOTHY W PAXTON	06/06/1991	CLOSED
91 DR 005555	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- MARTHA J JOHNSON	11/12/1991	CLOSED
92 CV 005817	JOHNSON, BRYAN B		DF		BANK ONE COLUMBUS NA -VS- FRANK E IVAN	07/21/1992	CLOSED
92 CV 007790	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- JOHN D MOORE	09/30/1992	CLOSED
93 CV 002031	JOHNSON, BRYAN B		DF		NANCY FLAHERTY -VS- BRYAN B JOHNSON	03/22/1993	CLOSED
93 CV 006318	JOHNSON, BRYAN B		DF		BETTY A DAVIS -VS- BRYAN B JOHNSON	09/09/1993	CLOSED
93 CV 006775	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- SHARON VANCLEEF	09/27/1993	CLOSED
93 CV 006938	JOHNSON, BRYAN B		NP		LAUREN A IVES -VS- WILLIAM H PEOPLES	10/04/1993	CLOSED
93 JG 031677	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR JOAN SANDAKER	09/20/1993	ACTIVE
94 CV 000735	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- PAM BARAGONA	02/01/1994	CLOSED
94 CV 001125	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- HOME INVESTORS INC	02/17/1994	CLOSED
94 CV 002354	JOHNSON, BRYAN B		DF		METROPOLITAN LIFE INSURANCE CO -VS- JOAN L SANDAKER	04/05/1994	CLOSED
94 CV 002354	JOHNSON, BRYAN B		DF		METROPOLITAN LIFE INSURANCE CO -VS- JOAN L SANDAKER	04/05/1994	CLOSED
94 CV 004343	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- JEFFREY E DOW	06/22/1994	CLOSED
94 JG 018576	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR JENNIFER DYCKES	08/26/1994	CLOSED
94 JG 023579	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR GLADYS MOORE	11/23/1994	ACTIVE
95 DR 002247	JOHNSON, BRYAN B		DF		DOROTHY A POINDEXTER -VS- TIMOTHY D POINDEXTER	05/26/1995	CLOSED
					CREDITOR BRYAN B JOHNSON -VS- DEBTOR		

95 JG 004552	JOHNSON, BRYAN B		PL		GLADYS MOORE	03/30/1995	ACTIVE
95 JG 004553	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR GEORGE MOORE SR	03/30/1995	ACTIVE
96 JG 005437	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR DONALD BELL	04/10/1996	INACTIVE
97 CV 000251	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON -VS- WILLIAM T VREELAND	01/09/1997	CLOSED
97 JG 003781	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR CHARLES PRICE	03/11/1997	CLOSED
98 JG 010235	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR E MAE WILLIAMS	07/31/1998	CLOSED
99 CV 003468	JOHNSON, BRYAN B		DF		MIDFIRST BANK -VS- MATTIE NEWELL ADMR	04/26/1999	CLOSED
99 CV 005473	JOHNSON, BRYAN B		DF		UNITED COMPANIES LENDING CORPORATION -VS- EDNA M WILLIAMS	07/02/1999	CLOSED
99 JG 005311	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON -VS- DEBTOR VIRGINIA THOMAS	05/21/1999	CLOSED
04 CV 006377	JOHNSON, BRYAN B		DF		WELLS FARGO BANK MINNESOTA NATIONAL ASSOCIAT -VS- WYLIE E CROSS SR	06/17/2004	CLOSED
93 CV 006938	JOHNSON, BRYAN B		DF		LAUREN A IVES -VS- WILLIAM H PEOPLES	10/04/1993	CLOSED
99 JG 002324	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ATTY -VS- DEBTOR JOHN R ELLIS	02/03/1999	INACTIVE
99 JG 005780	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ATTY -VS- DEBTOR ROBERT R SULSER	06/15/1999	ACTIVE
01 CV 004973	JOHNSON, BRYAN B		DF		FRANKLIN COUNTY TREASURER WADE STEEN -VS- ESTATE OF JAMES C CAMERON JR	05/29/2001	CLOSED
94 JG 018577	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR ALBERTA DAVIS	08/26/1994	ACTIVE
95 JG 009865	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR MINNIE HARMON	07/11/1995	INACTIVE
96 JG 007401	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR JEAN LONGWORTH	05/10/1996	CLOSED
99 JG 002485	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR SIDNEY H RYMAN	02/10/1999	INACTIVE
99 JG 004277	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR ROBERT R SULSER	04/07/1999	INACTIVE
99 JG 006047	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR ROBERT R SULSER	06/30/1999	ACTIVE
99 JG 009115	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON ESQ -VS- DEBTOR SHEILA SAMANTH PATE	09/22/1999	ACTIVE
03 CV 006505	JOHNSON, BRYAN B		PL		ESTATE CHARLES D REDMOND -VS- PATRICIA J MCCLELLAND	06/12/2003	CLOSED
01 CV 012500	JOHNSON, BRYAN B		DF		FEDERAL NATIONAL MORTGAGE ASSOCIATION -VS- JAMES L COLLINS	12/19/2001	CLOSED
96 CV 009437	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON GRDN -VS- GRETCHEN M BOWER IND	12/06/1996	CLOSED
97 CV 000250	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON GRDN -VS- GRETCHEN B BOWER IND	01/09/1997	CLOSED
97 CV 007497	JOHNSON, BRYAN B		DF		STATE SAVINGS BANK -VS- GEORGE J HEER	08/06/1997	CLOSED
97 CV 009979	JOHNSON, BRYAN B		DF		STATE SAVINGS BANK -VS- GEORGE J HEER	11/06/1997	CLOSED
97 CV 010746	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON GRDN -VS- OHIO STATE DEPARTMENT HUMAN SERVICES	12/08/1997	CLOSED
97 JG 007270	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON GRDN -VS- DEBTOR GRETCHEN BOWER	04/18/1997	ACTIVE
97 JG 008824	JOHNSON, BRYAN B		PL		CREDITOR BRYAN B JOHNSON GRDN -VS- DEBTOR RUTH B WEISHAUPT	05/08/1997	ACTIVE
98 CV 007452	JOHNSON, BRYAN B		DF		ARLINGTON COURT NURSING HOME SERVICE CO INC -VS- BRYAN B JOHNSON GRDN	09/28/1998	CLOSED
98 CV 009558	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON GRDN -VS- KAREN SUZANNE BOND	12/10/1998	CLOSED
98 LP 000004	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON GRDN -VS- RUTHANNE HANISCH	09/03/1998	ACTIVE
98 LP 000006	JOHNSON, BRYAN B		PL		BRYAN B JOHNSON GRDN -VS- RUTHANNE HANISCH	09/24/1998	ACTIVE
93 CR 005734	JOHNSON, BRYAN D	M	DF	03/11/1975	STATE OF OHIO -VS- BRYAN D JOHNSON	10/04/1993	CLOSED
06 CR 003196	JOHNSON, BRYAN E	M	DF	08/23/1980	STATE OF OHIO -VS- BRYAN E JOHNSON	05/01/2006	CLOSED
07 CR 001241	JOHNSON, BRYAN E	M	DF	08/23/1980	STATE OF OHIO -VS- BRYAN E JOHNSON	02/20/2007	ACTIVE
98 CV 007452	JOHNSON, BRYAN E		DF		ARLINGTON COURT NURSING HOME SERVICE	09/28/1998	CLOSED

					CO INC -VS- BRYAN B JOHNSON GRDN		
91 CR 003772	JOHNSON, BRYAN F	M	DF	05/21/1973	STATE OF OHIO -VS- BRYAN F JOHNSON	07/08/1991	CLOSED
95 CR 004139	JOHNSON, BRYAN K	M	DF	02/27/1963	STATE OF OHIO -VS- BRYAN K JOHNSON	07/14/1995	CLOSED
01 CR 006914	JOHNSON, BRYAN K	M	DF	02/13/1971	STATE OF OHIO -VS- BRYAN K JOHNSON	11/29/2001	CLOSED
02 CR 000340	JOHNSON, BRYAN K	M	DF	02/13/1971	STATE OF OHIO -VS- BRYAN K JOHNSON	01/25/2002	CLOSED
02 JG 021129	JOHNSON, BRYAN L		DF		CREDITOR OHIO STATE DEPT TAXATION -VS- DEBTOR BRYAN L JOHNSON	11/27/2002	ACTIVE
03 JG 014625	JOHNSON, BRYAN L		DF		CREDITOR OHIO STATE DEPARTMENT TAXATION -VS- DEBTOR BRYAN L JOHNSON	12/18/2003	ACTIVE
92 CR 006008	JOHNSON, BRYAN L	M	DF	04/28/1970	STATE OF OHIO -VS- BRYAN L JOHNSON	11/17/1992	CLOSED
93 CR 003095	JOHNSON, BRYAN L	M	DF	04/28/1970	STATE OF OHIO -VS- BRYAN L JOHNSON	06/03/1993	CLOSED
93 CR 006005	JOHNSON, BRYAN L	M	DF	04/28/1970	STATE OF OHIO -VS- BRYAN L JOHNSON	10/15/1993	CLOSED
94 CR 001414	JOHNSON, BRYAN L	M	DF	04/28/1970	STATE OF OHIO -VS- BRYAN L JOHNSON	03/10/1994	CLOSED
96 CR 003613	JOHNSON, BRYAN L	M	DF	04/28/1970	STATE OF OHIO -VS- BRYAN L JOHNSON	06/20/1996	CLOSED
06 CV 015551	JOHNSON, BRYAN M		DF		DEUTSCHE BANK TRUST COMPANY AMERICAS -VS- BRYAN JOHNSON	11/28/2006	CLOSED
05 CV 009045	JOHNSON, BRYAN N		DF		AMERICAN FAMILY INSURANCE COMPANY -VS- BRYAN N JOHNSON	08/22/2005	CLOSED
06 CR 000804	JOHNSON, BRYAN N	M	DF	09/10/1985	STATE OF OHIO -VS- BRYAN N JOHNSON	01/30/2006	CLOSED
96 DR 004363	JOHNSON, BRYAN R	M	DF		SHERRY L JOHNSON -VS- BRYAN R JOHNSON	10/08/1996	CLOSED
02 CV 001739	JOHNSON, BRYAN T		PL		BRYAN T JOHNSON -VS- CITIZENS INSURANCE	02/14/2002	CLOSED
02 DR 000874	JOHNSON, BRYAN T	M	DF	01/12/1964	CARMEN JOHNSON -VS- BRYAN T JOHNSON	03/01/2002	CLOSED
02 DV 000201	JOHNSON, BRYAN T	M	DF	01/12/1964	CARMEN A JOHNSON -VS- BRYAN T JOHNSON	04/19/2002	CLOSED
93 JG 034105	JOHNSON, BRYAN W		DF		CREDITOR OHIO STATE DEPARTMENT TAXATION -VS- DEBTOR BRYAN W JOHNSON	12/07/1993	ACTIVE
06 JG 028786	JOHNSON, BRYANT		DF		CREDITOR OHIO STATE DEPARTMENT TAXATION -VS- DEBTOR BRYANT JOHNSON	09/25/2006	ACTIVE
02 JG 001179	JOHNSON, BRYANT C		DF		CREDITOR PARK NATIONAL BANK -VS- DEBTOR BRYANT C JOHNSON	03/07/2002	ACTIVE
97 JG 004259	JOHNSON, BRYANT C		DF		CREDITOR PARK NATIONAL BANK -VS- DEBTOR BRYANT C JOHNSON	03/25/1997	ACTIVE
00 JG 014846	JOHNSON, BRYCE S		DF		CREDITOR OHIO STATE DEPARTMENT TAXATION -VS- DEBTOR BRYCE S JOHNSON III	06/16/2000	CLOSED
06 CV 002356	JOHNSON, BRYON E		DF		CHASE MANHATTAN BANK -VS- BYRON JOHNSON	02/21/2006	CLOSED
90 CV 002865	JOHNSON, BUILDERS		DF		FIFTH THIRD BANK OF COLUMBUS	04/17/1990	CLOSED
90 DM 000005	JOHNSON, BUREN K		PL		IN THE MATTER OF BUREN K JOHNSON JR AND GWEN E JOHNSON	01/04/1990	CLOSED
84 CR 000101	JOHNSON, BYRNE K	M	DF	11/10/1958	STATE OF OHIO -VS- BYRNE K JOHNSON	01/13/1984	CLOSED
01 CV 011265	JOHNSON, BYRON		PL		BYRON JOHNSON -VS- ROBERT H ALBERT SR	11/14/2001	CLOSED
02 CV 012132	JOHNSON, BYRON		PL		BYRON JOHNSON -VS- GEORGE R GHERKENS	10/31/2002	CLOSED
02 CV 013355	JOHNSON, BYRON		DF		CHASE MANHATTAN BANK -VS- BYRON JOHNSON	11/27/2002	CLOSED
05 JG 004998	JOHNSON, BYRON		DF		CREDITOR DRS PAUL & LYDIC DDS INC -VS- DEBTOR BYRON JOHNSON	06/22/2005	INACTIVE
06 CV 002356	JOHNSON, BYRON		DF		CHASE MANHATTAN BANK -VS- BYRON JOHNSON	02/21/2006	CLOSED
07 CV 007834	JOHNSON, BYRON		DF		US BANK NATIONAL ASSOCIATION -VS- BYRON JOHNSON	06/13/2007	ACTIVE
04 JG 023963	JOHNSON, BYRON E		DF		CREDITOR OHIO STATE DEPARTMENT TAXATION -VS- DEBTOR BYRON E JOHNSON	11/09/2004	ACTIVE
06 JG 001533	JOHNSON, BYRON E		DF		CREDITOR CAPITAL ONE BANK -VS- DEBTOR BYRON E JOHNSON	01/27/2006	ACTIVE
07 CV 007834	JOHNSON, BYRON E		DF		US BANK NATIONAL ASSOCIATION -VS- BYRON JOHNSON	06/13/2007	ACTIVE
94 JG 008191	JOHNSON, BYRON E		DF		CREDITOR LOREN PRINCE M D INC -VS- DEBTOR BYRON E JOHNSON	03/25/1994	ACTIVE
97 CV 002472	JOHNSON, BYRON E		DF		FIRST NATIONWIDE MORTGAGE CORPORATION -VS- BYRON E JOHNSON	01/27/1997	CLOSED
83 DR 001024	JOHNSON, BYRON H		PL		BYRON H JOHNSON -VS- TERRY A JOHNSON	04/11/1983	CLOSED
00 CV 008351	JOHNSON, BYRON K		PL		BYRON K JOHNSON -VS- DIVINE INC	09/19/2000	CLOSED

General Inquiry

Search Criteria

Last Name: JOHNSON; **First Name:** BRYAN;

Search Results

171 record(s) found.

1-50 of 171 Next Sort Results.. Go

Party	Affl	Party Type	D.O.B	Case Status	Case Number
JOHNSON, BRYAN		DFNDT	02/27/1963	CLOSED	1995 CR A 018431
JOHNSON, BRYAN		DFNDT	12/24/1955	CLOSED	1996 TR D 322571
JOHNSON, BRYAN		DFNDT	12/20/1971	CLOSED	1996 TR D 376471
JOHNSON, BRYAN		DFNDT	03/11/1975	CLOSED	1997 TR D 130171
JOHNSON, BRYAN		DFNDT	05/31/1978	CLOSED	1997 TR D 156843
JOHNSON, BRYAN		DFNDT	03/10/1967	CLOSED	1998 TR D 396411
JOHNSON, BRYAN		DFNDT	03/11/1975	CLOSED	2001 TR D 206141
JOHNSON, BRYAN		DFNDT	03/11/1975	CLOSED	2002 TR D 123276
JOHNSON, BRYAN		DFNDT	03/11/1975	CLOSED	2004 TR D 147562
JOHNSON, BRYAN		DFNDT	05/31/1978	CLOSED	2004 TR D 197150
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVH 006277
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006271
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006273
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006274
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006275
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006276
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006278
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006279
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006280
JOHNSON, BRYAN B ADM OF ESTATE		PLNTF		CLOSED	1995 CVI 006281

JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006282
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006283
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006284
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006285
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006286
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006287
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006288
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006289
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006290
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006291
JOHNSON, BRYAN B ADM OF ESTATE	PLNTF		CLOSED	1995 CVI 006292
JOHNSON, BRYAN B ADM OF THE	PLNTF		CLOSED	1995 CVI 006270
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006260
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006261
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006263
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006264
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006265
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006266
JOHNSON, BRYAN B ADMINISTRATOR	PLNTF		CLOSED	1995 CVF 006267
JOHNSON, BRYAN B GUARDIAN OF TH	PLNTF		CLOSED	1995 CVF 006401
JOHNSON, BRYAN B GUARDIAN OF TH	PLNTF		CLOSED	1995 CVG 006399
JOHNSON, BRYAN K	DFNDT	10/22/1973	CLOSED	1995 CR B 009713
JOHNSON, BRYAN K	DFNDT	10/22/1973	CLOSED	1995 TR D 142211
JOHNSON, BRYAN K	DFNDT	10/22/1973	CLOSED	1996 CR B 002385
JOHNSON, BRYAN K	DFNDT	10/22/1973	CLOSED	1997 TR D 144360
JOHNSON, BRYAN K	DFNDT	10/22/1973	CLOSED	1999 TR D 130975

JOHNSON, BRYAN K	DFNDT	10/22/1973	CLOSED	1999 TR D 178852
JOHNSON, BRYANT	DFNDT		CLOSED	1994 CVG 023770
JOHNSON, BRYANT A	DFNDT	07/08/1968	CLOSED	2001 CR B 010806
JOHNSON, BRYANT A	DFNDT	07/08/1968	CLOSED	2002 TR D 158466

General Inquiry

Search Criteria

Last Name: JOHNSON*; **First Name:** BRYAN;

Search Results

8 record(s) found.

1-8 of 8 Sort Results.. Go

Party	Affl	Party Type	D.O.B	Case Status	Case Number
JOHNSON #350-707, BRYAN K		DFNDT		Closed	97 CR I 11 0464
JOHNSON, BRYAN		DFNDT	02/13/1971	Closed	97 CR I 05 0206
JOHNSON, BRYAN		DFNDT	02/13/1970	Closed	97 DR A 09 0329
JOHNSON, BRYAN B		DFNDT		Closed	96 CV H 02 0045
JOHNSON, BRYAN B ADMN		PLNTF		Closed	95 CV H 06 0200
JOHNSON, BRYAN K		DFNDT		Closed	97 CR I 09 0356
JOHNSON, BRYAN K		DFNDT	02/13/1971	Closed	97 CR I 07 0299
JOHNSON, BRYAN K		DFNDT	03/13/1971	Closed	97 CR I 07 0268

Fairfield County Clerk of Courts

Deborah Smalley, Clerk

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Party Name	Party Type	Case Number	Date Filed	Status
JOHNSON BRYAN B	PLNTF	1998 MI 00004	5/12/1998	Open
JOHNSON,GUARDIAN OF OLGA VELVELIS BRYAN B	DFNDT	2001 CV 00423	6/26/2001	Closed

Displaying Records: 1 Through 2
Records Returned: 2

General Inquiry

Search Criteria

Last Name: johnson; **First Name:** bryan;

Search Results

5 record(s) found.

1-5 of 5 Sort Results.. Go

Party	Affl	Party Type	D.O.B	Case Status	Case Number
JOHNSON, BRYANT C		DFNDT		OPEN	1992 JD 050291
JOHNSON, BRYANT C		DFNDT		OPEN	2002 JD 077073
JOHNSON, BRYAN B ADM OF ESTATE OF ANNABEL CONKLE		PLNTF		CLOSED	1992 CV 00603
JOHNSON, BRYANT C		DFNDT		CLOSED	1992 CV 00037
JOHNSON, BRYANT C		DFNDT		CLOSED	1997 JD 064128

Franklin County Probate Court

Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 322118
Ending with Case# : 388088

Total Records: 40 << Prev Cases Next Cases >> New Search | Probate Homepage

Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
322118		E	15	99	JOHNSON, BRYAN B.	01
330666		E	02	99	HOWARD, TIMOTHY J.	01
339821		E	01	99	JOHNSON, BRYAN B.	01
341968		GA	PE	99	JOHNSON, BRYAN B.	02
341968		GA	PE	99	O'CONNOR, LORETTA	01
360268		GA	PO	99	JOHNSON, BRYAN B.	01
365531		GA	PO	22	JOHNSON, BRYAN B.	01
365789		T	WD	09	MICHEL, MARGARET D.	02
366012		E	02	99	BARTH, KARL L.	01
366012		E	02	99	BARTH, KARL L.	02
369659		E	02	99	JOHNSON, BRYAN B.	02
369660		E	02	99	JOHNSON, BRYAN B.	01
371394		GM	PO	99	HILYARD, PAUL M.	01
371394		GM	PO	99	HILYARD, REBBECCA RUTH DALTON	02
372163		T	TT	99	JOHNSON, BRYAN B.	03
374557		GA	PO	99	JOHNSON, BRYAN B.	01
374558		M	M	99		01
375047	A	C	07	99	BRIGNER, ROY L.	01
376388		GA	PO	99	JOHNSON, BRYAN B.	01
376748		GA	PO	99	JOHNSON, BRYAN B.	01
378116		M	M	99		01
378437		GA	PO	99	JOHNSON, BRYAN B.	01
378665		GA	PE	99	JOHNSON, BRYAN B.	01
378724		GA	PE	99	REDMAN, REBECCA L.	01
378724	B	C	01	99		01
379394		GA	PO	99	JOHNSON, BRYAN B.	01
379732		E	15	99	JOHNSON, BRYAN B.	01
379760		GA	PO	23	JOHNSON, BRYAN B.	01
380074		GA	PO	99	JOHNSON, BRYAN B.	01
380080		GA	PO	99	JOHNSON, BRYAN B.	01
380855		GA	PE	99	JOHNSON, BRYAN B.	01
381097		GA	PO	99	JOHNSON, BRYAN B.	01
381775		GA	PO	99	JOHNSON, BRYAN B.	01
382987		GA	PO	99	JOHNSON, BRYAN B.	01

384150	M	M	99		01
385680	GA	PO	99	JOHNSON, BRYAN B.	01
386447	GA	PO	99	JOHNSON, BRYAN B.	01
387345	E	01	99	JOHNSON, BRYAN B.	01
387784	GA	PO	99	CORRIGAN, RICHARD W.	01
388088	GA	PO	22	JOHNSON, BRYAN B.	01

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Franklin County Probate Court

Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 388088
Ending with Case# : 410422

Total Records: 40 << Prev Cases Next Cases >> New Search | Probate Homepage

Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
388088		GA	PO	22	JOHNSON, BRYAN B.	01
388164		GM	EO	99	BARTELS, LYNN	02
388164		GM	EO	99	BARTELS, ROBERT	01
390178		GA	PO	99	JOHNSON, BRYAN B.	01
390297		GM	EO	99	JOHNSON, BRYAN B.	01
391495	B	M	M	99		01
393421		M	M	99		01
393593		GM	PO	99	SAVAGE, KEN	01
393593		GM	PO	99	SAVAGE, PATRICIA	02
394673		M	M	99		01
394736		T	WD	23	JOHNSON, BRYAN B.	01
395306		GA	PE	99	KEYES, JIM	01
396933		E	15	99	JOHNSON, BRYAN B.	01
396972		GA	PE	99	LOGUE, MARILYN A.	01
396972	A	C	01	99		01
399183		M	M	99		01
399472		GM	EO	99	JOHNSON, BRYAN B.	01
399473		GM	EO	99	JOHNSON, BRYAN B.	01
399642		M	M	99		01
400359		GA	PO	99	JOHNSON, BRYAN B.	01
400416		GA	PO	99	JOHNSON, BRYAN B.	01
401709	A	C	01	99	MITCHELL, LLOYD G.	01
401983		E	02	99	JOHNSON, BRYAN B.	01
401983	D	C	01	99		01
401983	D	C	01	99		02
401983	E	C	08	99	JOHNSON, BRYAN B.	01
402413		GA	PE	99	MC FADDEN, TAMMY	01
404242		E	02	99	JOHNSON, BRYAN B.	01
404973		T	WD	99	JOHNSON, BRYAN B.	01
405025		T	WD	99	HANDFORTH, JOHN H.	02
405025		T	WD	99	JOHNSON, BRYAN B.	01
406716		M	M	99		01
406936		GM	EO	99	HESS, ROSALEE	01
407091		T	WD	99	JOHNSON, BRYAN B.	01

407673	A	C	01	99	JOHNSON, BRYAN B.	02
407897		E	01	99	JOHNSON, BRYAN B.	01
409351		GM	EO	99	KNISLEY, SYLVIA A.	01
410187		E	01	99	STONE, ROBERT P.	01
410246		E	02	99	JOHNSON, BRYAN B.	01
410422		GA	PO	99	CHAMBERS, JUNE	01

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Franklin County

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 410422
Ending with Case# : 414295

Total Records: 40 << Prev Cases Next Cases >> New Search | Probate Homepage

Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
410422		GA	PO	99	CHAMBERS, JUNE	01
410562		GM	EO	99	LOHMAN, CATHY	01
410562	A	C	01	99	LOHMAN, CATHY	01
410562	B	C	01	99	LOHMAN, CATHY	01
410730		E	02	99	JOHNSON, BRYAN B.	01
411053		E	05	99	EMORY, ROBERT R.	01
411053		E	05	99	EMORY, ROBERT R.	02
411266		GA	PO	99	JOHNSON, BRYAN B.	01
411313		E	01	99	JOHNSON, BRYAN B.	01
411482		GM	EO	99	DOUGHERTY, TERRY L.	01
411625		GA	PE	99	MC FADDEN, NORMA L.	01
412136		GA	PO	99	JOHNSON, BRYAN B.	01
412302		E	01	99	ARZAMENDI, EVA J.	01
412348		T	TT	99	EISENMAN, RICHARD L.	02
412626	WC	C	04	99	BREWER, THOMAS	01
412672		GA	PE	99	JOHNSON, BRYAN B.	01
412672	A	C	01	99	MONCRIEF, ANNA BATES	01
412962		E	01	99	WAIBEL, MARILYN B.	01
413050		E	01	99	JOHNSON, BRYAN B.	01
413050	B	C	01	99	WOODS, MIKEL B.	01
413230		E	04	99	JOHNSON, BRYAN B.	01
413276		E	01	99	JOHNSON, BRYAN B.	01
413276	A	C	02	99	HARTGERS, FRANK	01
413289		GA	PE	99	JOHNSON, BRYAN B.	01
413289	A	C	01	99	PAYNE, MILDRED RADER	01
413379		E	01	99	BERENDT, MARY JO	01
413456		E	04	99	WIANT, JEAN	01
413613		GA	PO	99	JOHNSON, BRYAN B.	01
413613		GA	PO	99	JOHNSON, BRYAN B.	02
413613	A	C	01	99	CLYBURN, OLA M.	01
413643		E	02	99	JOHNSON, BRYAN B.	01
413643	A	C	01	99	IVAN, JOHN	01
414060		E	13	99	JOHNSON, BRYAN B.	02
414060		E	13	99	WINKLER, SANDRA J.	01

414164	GA	PO	99	JOHNSON, BRYAN B.	01
414175	E	13	99	JOHNSON, BRYAN B.	01
414176	E	03	99	RAYMORE, GEORGIA	01
414240	E	02	99	JOHNSON, BRYAN B.	01
414293	E	02	99	MITCHELL, WILLIAM L., II	01
414295	E	02	99	JOHNSON, BRYAN B.	01

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 414295
Ending with Case# : 417715

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
414295		E	02	99	JOHNSON, BRYAN B.	01
414321		E	01	99	COWGILL, JAMES E., JR.	01
414530		GA	PE	99	WAGNER, BARBARA A.	01
414551		E	01	99	GENHEIMER, EVAN G.	01
414716		E	01	99	CORBETT, KATHLEEN A.	01
414716	A	C	01	99	HITE, DOLLIE A.	01
415060		E	02	99	WOLFE, CHERYL E.	01
415369		GA	PE	99	JOHNSON, BRYAN B.	01
415369	A	C	01	99	KAYLOR, LUCILLE	01
415447		GA	PO	99	JOHNSON, BRYAN B.	01
415447	A	C	01	99	DILLON, RITA	01
415542		GA	PO	99	SHEETS, KITTY SUE	01
415551		E	02	99	BJORNSON, AIJA	01
415655		GA	PO	99	CUNNINGHAM, BETTY LOU	01
415655	A	C	01	99	ROBINSON, ORVEL A	01
415715		E	01	99	PHILLIPS, JOHN D.	02
415750		GA	PE	99	JOHNSON, BRYAN B.	01
415750	A	C	01	99	HALL, EDGAR	01
415750	B	C	08	99	HALL, EDGAR	01
415870		GA	PE	99	SANDERS, ARLECIA L.	01
415920		GA	PE	99	JOHNSON, BRYAN B.	01
415966		E	01	99	JOHNSTON, EDNA M.	01
415967		E	01	99	SMITH, ISABEL T.	01
416042		E	03	99	MARTIN, GENE	01
416242	B	C	12	99	MYERS, CLARENCE D.	01
416275		GA	PE	99	JOHNSON, BRYAN B.	01
416275	A	C	01	99	SANDAKER, JOAN L.	01
416301		GA	PE	99	JOHNSON, BRYAN B.	01
416301	A	C	01	99	JOHNSON, BRYAN B.	01
416598		GA	PO	99	LEVESQUE, LORRAINE	01
416638		E	03	99	DAVIS, LINDA	01
416689		E	01	99	FLESHER, HAZEL M.	01
416861		E	01	99	CUSTER, LILLIAN L.	01
417027		GM	EO	99	DYCKES, JAMES	03

417027		GM	EO	99	DYCKES, JAMES	04
417297		E	04	99	JOHNSON, BRYAN B.	01
417381		GA	PO	99	JOHNSON, BRYAN B.	01
417381	A	C	01	99	HAYES, JAMES W.	01
417619		E	02	99	JOHNSON, BRYAN B.	02
417715		GA	PE	99	JOHNSON, BRYAN B.	01

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 417715
Ending with Case# : 421938 A

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
417715		GA	PE	99	JOHNSON, BRYAN B.	01
417768		GA	PO	99	LESTER, E. S.	02
417790		GA	PO	99	JOHNSON, BRYAN B.	01
417951		E	02	99	SANDERS, ARLECIA L.	01
417991		GA	PO	99	GUENTHER, MADELYN E.	01
418227		GA	PO	99	JOHNSON, BRYAN B.	01
418633		E	02	99	HOPKINS, CLAUDETTE	01
418633	B	C	01	99	HOPKINS, CLAUDETTE	01
418830		E	01	99	SWORDS, CYNTHIA S.	01
418830	A	C	01	99	POLLOCK, STEVEN	01
419067		E	04	99	JOHNSON, BRYAN B.	01
419107		GA	PE	99	JOHNSON, BRYAN B.	01
419210		GA	PE	99	CARTE, JUDY M.	01
419265		E	02	99	SARAKON, WILLIAM	03
419265	A	C	10	99	SARAKON, MABLE R.	01
419356		E	01	99	KAUFFMAN, RONALD P.	01
419564		E	04	99	JOHNSON, BRYAN B.	01
419641		GA	EO	99	JOHNSON, BRYAN B.	01
419851		GA	PE	99	JOHNSON, BRYAN B.	01
419851	A	C	02	99	JENKINS, LORRAINE R.	01
419851	B	C	01	99	JENKINS, LORAINE R.	01
420109		GA	PE	99	JOHNSON, BRYAN B.	01
420109	A	C	01	99	STONIS, JULIA E.	01
420149		E	03	99	BAILEY, GEORGE T.	01
420436		GA	PE	99	RICHARDSON, BEVERLY	02
420436	A	C	01	99	RICHARDSON, BEVERLY	01
420697		GM	EO	99	EMORY, ROBERT R	01
421022		E	02	99	JOHNSON, BRYAN B.	01
421104		E	02	99	HARRIS, ANDREW	01
421181		GA	PE	99	DURIS, JAYME L	03
421181		GA	PE	99	JOHNSON, BRYAN B.	01
421181	A	C	02	99	UNTEREINER, GYNETH	01
421428		E	01	99	DE SANTIS, DIANA M.	01
421487		E	01	99	ALEXANDER, MARY K.	01

421565		GA	PO	99	JOHNSON, BRYAN B.	01
421565		GA	PO	99	JOHNSON, BRYAN B.	02
421833		E	04	99	JOHNSON, BRYAN B.	01
421938		E	01	99	JOHNSON, BRYAN B.	03
421938		E	01	99	JOHNSON, BRYAN B.	04
421938	A	C	01	99	JOHNSON, BRYAN B.	01

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FRANKLIN COUNTY PROBATE COURT
LAWRENCE A. BELSKIS, JUDGE

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 422082
Ending with Case# : 425411

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
422082		GA	PE	99	JOHNSON, BRYAN B.	01
422095		GA	PE	99	JOHNSON, BRYAN B.	01
422119		GA	PE	99	JOHNSON, BRYAN B.	01
422119	A	C	01	99	LARVA, AUDREY	01
422167		E	01	99	JOHNSON, BRYAN B.	01
422331		GA	PO	99	APPOINTMENT, ORDER ONLY/NO	01
422333		GA	PE	99	YEAGER, JANYCE	01
422334		GA	PO	99	PETTIT, JOANNE	01
422334	A	C	01	99	LEWIS, MARY L.	01
422348		GM	PO	99	WINFORD, DONALD	01
422587		GA	PE	99	JOHNSON, BRYAN B.	01
422587		GA	PE	99	JOHNSON, BRYAN B.	03
422587		GA	PE	99	SIGRIST, GAIL DICKINS	02
422587	A	C	02	99	CAULK, ANN B.	01
422751		E	04	99	JOHNSON, BRYAN B.	01
422837		GA	PO	99	RINEHART, ADAM R.	01
422982		GA	PO	99	JOHNSON, BRYAN B.	01
422984	A	C	08	99	HEINE, RENATE J.	01
423099		GA	PO	99	RINEHART, ADAM R.	01
423226		GA	PE	99	RINEHART, ADAM R.	01
423227		E	01	99	WILSON, SUSIE C.	01
423231		E	04	99	JOHNSON, BRYAN B.	01
423331		GA	PE	99	RINEHART, ADAM R.	01
423348		E	04	99	JARRETT, JEANETTE	01
423586		E	01	99	JOHNSON, BRYAN B.	01
424014		E	02	99	JOHNSON, BRYAN B.	01
424117		GA	EO	23	JOHNSON, BRYAN B.	01
424644		GA	PE	99	CRAY, CARL	01
424645		GA	PE	99	HORTON, MARGARET	01
424645		GA	PE	99	JOHNSON, BRYAN B.	03
424645	A	C	01	99	JOHNSON, BRYAN B.	01
424710	A	C	06	99	BANK ONE, OHIO TRUST COMPANY	01
424882		T	IV	99	BANK ONE, OHIO TRUST COMPANY	01
424882	A	C	02	99	BARNES, ZELMA ELISHA	01

424949	GA	PE	99	JOHNSON, BRYAN B.	01
425056	E	04	99	JOHNSON, BRYAN B.	01
425092	E	01	99	JOHNSON, BRYAN B.	02
425092	E	01	99	PEARSON, EDWIN A.	01
425356	E	01	99	JOHNSON, BRYAN B.	01
425411	GA	PE	99	JOHNSON, BRYAN B.	01

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Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 425411
Ending with Case# : 430452

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
425411		GA	PE	99	JOHNSON, BRYAN B.	01
425951		E	01	99	BESCO, HOMER D.	01
425952		E	04	99	BECKER, SANDRA K.	01
425953		E	04	99	WHALEY, ELIJAH, JR.	01
426010		GA	PO	99	JOHNSON, BRYAN B.	01
426218		GA	PO	99	JOHNSON, BRYAN B.	01
426353		GA	PO	99	JOHNSON, BRYAN B.	03
427285		E	04	99	JOHNSON, BRYAN B.	01
427545		E	01	99	FLESHER, MAX E.	01
427909		E	01	99	BLAIR, JAN M.	02
427909		E	01	99	OSBORNE, DAVID	01
428319		GA	PE	99	JOHNSON, BRYAN B.	01
428357		E	04	99	ERCKERT, IRENE	01
428496		GA	PE	99	ROLLINS, CAROL	01
428551		GA	PE	99	JOHNSON, BRYAN B.	01
428736		GA	PE	99	GREEN, BARBARA L.	01
428736		GA	PE	99	GREEN, BARBARA L.	02
428786	WC	C	04	99	HAPKE, DAVID BARTEL	01
428804		E	01	99	PINKSTON-SMITH, KATHY	01
428804		E	01	99	SMITH, BOBBIE, JR.	03
428804		E	01	99	WILLIS, BEVERLY	02
428804	A	C	01	99	PINKSTON-SMITH, KATHY	01
428804	A	C	01	99	SMITH, BOBBIE L., JR.	03
428804	A	C	01	99	WILLIS, BEVERLY	02
428804	B	C	01	99	SMITH, BOBBIE L., JR.	03
428804	B	C	01	99	SMITH, KATHY PINKSTON	01
428804	B	C	01	99	WILLIS, BEVERLY	02
429047		GA	PO	99	JOHNSON, BRYAN B.	01
429047	A	C	01	99	LEWIS, BERNARD	01
429475		E	01	99	JOHNSON, BRYAN B.	02
429569		GA	PE	99	JOHNSON, BRYAN B.	01
429678		E	01	99	DUNNING, CLARE	03
429678		E	01	99	JOHNSON, BRYAN B.	01
429678		E	01	99	MONTAGUE-PORTZ, MEREDITH	02

429679	GA	PE	99	JOHNSON, BRYAN B.	01
429792	E	03	99	JOHNSON, BRYAN B.	01
429792	E	03	99	JOHNSON, BRYAN B.	02
429953	GA	PO	99	JOHNSON, BRYAN B.	01
430256	GA	PE	99	SCHNEIDER, CHARLES W.	01
430452	GA	PE	99	JOHNSON, BRYAN B.	01

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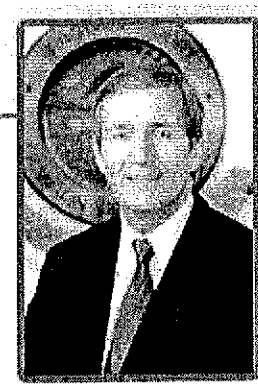
Franklin County Probate Court
Lawrence A. Belskis, Judge



Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 430452
Ending with Case# : 433430

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
430452		GA	PE	99	JOHNSON, BRYAN B.	01
430642		T	WD	99	SYLVIA, WESLEY	01
430879		GM	EO	99	JOHNSON, BRYAN B.	02
430879		GM	EO	99	PRYOR, MARILYN	01
430880		GM	EO	99	JOHNSON, BRYAN B.	02
430880		GM	EO	99	PRYOR, MARILYN	01
430880	A	C	01	99	JOHNSON, BRYAN B.	01
430881		E	05	99	YEAGER, CAROL	01
430882		E	02	99	MILLER, KIMBERLEY K.	01
430994		GM	EO	99	GAINER, PAULA L.	01
431113		E	01	99	BARTH, KARL	01
431201		GA	PE	99	FACKSON, MARILYN	01
431398	A	C	02	99	HAPKE, DAVID BARTEL	01
431427		GA	PE	99	JOHNSON, BRYAN B.	02
431427	A	C	01	99	JOHNSON, BRYAN B.	01
431456		GA	PE	99	BLAIR, KATHY	01
431457		GM	PO	99	GREEN, JAMES B.	01
431457		GM	PO	99	GREEN, ROBIN J.	02
431572	A	C	01	99	JOHNSON, BRYAN B.	01
431572	B	C	01	99	JOHNSON, BRYAN B.	01
431722		E	10	99	JOHNSON, BRYAN B.	01
431956		E	02	99	REXER, ROSEMARY	01
432080		E	01	99	BROWN, JANET	02
432080		E	01	99	JOHNSON, BRYAN B.	01
432081		GA	PE	99	JOHNSON, BRYAN B.	01
432130		GA	PO	99	JOHNSON, BRYAN B.	01
432455		GA	PO	99	JOHNSON, BRYAN B.	01
432569		GA	PO	99	JOHNSON, BRYAN B.	01
432607		GA	PE	99	JOHNSON, BRYAN B.	01
432607	A	C	01	99	JOHNSON, BRYAN B.	01
432613		E	02	99	JOHNSON, BRYAN B.	02
432613	A	C	01	99	JOHNSON, BRYAN B.	01
432738		E	01	99	DENNIS, BARBARA	02
432738		E	01	99	HENDRIX, JACQUELINE	01

432739	A	C	01	99	MOUNTS, LISA	01
433033		E	03	99	BRUNKHART, ROBERT L.	01
433033		E	03	99	BRUNKHART, ROBERT L.	02
433034		GA	PO	99	JOHNSON, BRYAN B.	01
433127		E	01	99	GADEK, JAMES E.	01
433430		E	01	99	GERKEN, JUDITH A.	01

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Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 433430
Ending with Case# : 436132

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
433430		E	01	99	GERKEN, JUDITH A.	01
433566		GA	PE	99	JOHNSON, BRYAN B.	01
433566	A	C	01	99	JOHNSON, BRYAN B.	01
433567		GA	PO	22	JOHNSON, BRYAN B.	02
433781		E	01	99	JOHNSON, BRYAN B.	01
433781	A	C	01	99	JOHNSON, BRYAN B.	01
433947		GA	PO	99	JOHNSON, BRYAN B.	01
434020		E	04	99	JOHNSON, BRYAN B.	01
434045		E	10	99	JOHNSON, BRYAN B.	01
434110		GA	PO	99	JOHNSON, BRYAN B.	02
434293		E	01	99	WEBSTER, DONALD L.	01
434533		GA	PO	23	JOHNSON, BRYAN B.	01
434646		E	09	99	JOHNSON, BRYAN B.	01
434679		E	04	99	JOHNSON, BRYAN B.	01
434679		E	04	99	JOHNSON, BRYAN B.	02
434680		E	03	99	JOHNSON, BRYAN B.	01
434680		E	03	99	JOHNSON, BRYAN B.	02
434681		E	03	99	JOHNSON, BRYAN B.	01
434681		E	03	99	JOHNSON, BRYAN B.	02
434682		E	04	99	JOHNSON, BRYAN B.	01
434978		GA	PE	99	JOHNSON, BRYAN B.	01
434978	A	C	01	99	JOHNSON, BRYAN B.	01
434979		E	01	99	SCHOENBERGER, FLORY DAVIES	01
434980		E	05	99	NOURSE, F. KAY	01
434980		E	05	99	NOURSE, F. KAY	02
434983		E	04	99	JOHNSON, BRYAN B.	01
435084		GM	EO	99	JOHNSON, BRYAN B.	01
435085		E	16	99	HOWARD, TIMOTHY J.	01
435085		E	16	99	JOHNSON, BRYAN B.	02
435085	A	C	12	99	JOHNSON, BRYAN B.	01
435224		E	17	99	JOHNSON, BRYAN B.	01
435225		T	TT	99	JOHNSON, BRYAN B.	01
435359		GA	PO	99	JOHNSON, BRYAN B.	01
435662		E	01	99	LOGUE, MARILYN A.	01

435666	GA	PO	99	JOHNSON, BRYAN B.	01
435836	E	05	99	WILSON, CHARLES E.	01
436001	E	04	99	DERENBERGER, RAYMOND A.	02
436001	E	04	99	JOHNSON, BRYAN B.	01
436032	E	01	99	LEE, SCOTT E.	01
436132	GA	PE	99	JOHNSON, BRYAN B.	01

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 436132
Ending with Case# : 439841

Total Records: 40 << Prev Cases Next Cases >> New Search | Probate Homepage

Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
436132		GA	PE	99	JOHNSON, BRYAN B.	01
436418		E	04	99	JOHNSON, BRYAN B.	01
436502		GA	PE	99	JOHNSON, BRYAN B.	01
436528		E	02	99	DOBBS, KEITH	01
436528	A	C	01	99	DOBBS, KEITH	01
436833		E	02	99	BERGER, CATHY	01
436853		GA	PE	99	JOHNSON, BRYAN B.	01
436911		GA	PE	99	GREENBERG, DONALD E.	01
437369		E	09	99	GERKEN, IRIS K.	01
437449		E	02	99	HOWARD, JOANNE W.	01
437449	A	C	10	99	HOWARD, JO ANNE W.	01
437451		E	02	99	PILKINGTON, CLEO	01
437565		GA	PE	99	JOHNSON, BRYAN B.	01
437565		GA	PE	99	JOHNSON, BRYAN B.	02
437565		GA	PE	99	JOHNSON, BRYAN B.	03
437616		E	01	99	STOEFFLER, PAMELA MAE PARKINSON	02
437746		GA	PO	99	JOHNSON, BRYAN B.	01
438033		GA	PE	99	SZLUZER, VICTOR	01
438094		GA	PE	99	JOHNSON, BRYAN B.	01
438094	A	C	07	99	JOHNSON, BRYAN B	01
438094	B	C	01	99	JOHNSON, BRYAN B.	01
438323		GA	PO	99	JOHNSON, BRYAN B.	01
438323		GA	PO	99	JOHNSON, BRYAN B.	03
438333		E	10	99	JOHNSON, BRYAN B.	01
438429		GA	PO	99	JOHNSON, BRYAN B.	01
438672		E	01	99	JOHNSON, BRYAN B.	01
438672		E	01	99	JOHNSON, BRYAN B.	02
438672		E	01	99	JOHNSON, BRYAN B.	03
438672		E	01	99	SINGER, LAWRENCE A.	04
438709		E	01	99	TRACY, SANDRA S.	01
438713		GA	PO	99	JOHNSON, BRYAN B.	01
438713		GA	PO	99	WALKER, FRANCES	02
438713	A	C	01	99	JOHNSON, BRYAN B.	01
438988		E	09	99	LEWIS, GLORIA	01

439429		GA	PE	99	JOHNSON, BRYAN B.	01
439429	A	C	01	99	JOHNSON, BRYAN B.	01
439560		E	06	99	JONES, LOUANNE	01
439560		E	06	99	SUTTON, DONALD R.	02
439637		GA	PO	99	HULL, LINDA J.	01
439841		E	02	99	JOHNSON, BRYAN B.	02

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Franklin County Probate Court

Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 439841
Ending with Case# : 444426

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
439841		E	02	99	JOHNSON, BRYAN B.	02
439921		GA	PE	99	JOHNSON, BRYAN B.	01
440082		E	11	99		01
440083		GA	PO	23	JOHNSON, BRYAN B.	01
440436		E	02	99	JOHNSON, BRYAN B.	01
440436		E	02	99	JOHNSON, BRYAN B.	02
440436	A	C	01	99	JOHNSON, BRYAN B.	01
440794		GA	PE	99	JOHNSON, BRYAN B.	01
440939		GA	PO	99	TIPTON, BARBARA	01
441157		E	01	99	MC COY, MICHAEL	01
441213		GA	PE	99	MESSER, ELIZABETH A.	01
441214		E	06	99	SOMMERFELD, TODD A.	01
441723		E	01	99	NATIONAL CITY, BANK	01
441950		GA	PE	99	URBAN, MARJORIE M	01
441951		E	03	99	JOHNSON, BRYAN B.	02
441985		GA	PE	99	JOHNSON, BRYAN B.	01
442082		GA	PE	99	JOHNSON, BRYAN B.	01
442150		GA	PO	99	JOHNSON, BRYAN B.	01
442150		GA	PO	99	JOHNSON, BRYAN B.	02
442150	A	C	01	99	JOHNSON, BRYAN B.	01
442240		E	01	99	JOHNSON, BRYAN B.	01
442240		E	01	99	LEWIS, ROBERT ALAN	02
442302		E	01	99	SCOTT, SUSAN HALLIDAY	01
442348		GA	PO	99	JOHNSON, BRYAN B.	01
442454		E	02	99	BARRETT, DOROTHY MAE	02
442507		E	02	99	MESSER, ELIZABETH	01
442772		E	01	99	SCARPITTI, THOMAS	01
442782		E	10	99	MICHAEL, TIMOTHY A.	01
442869		E	01	99	CRAMER, PATRICIA	01
442959		E	01	99	RAKOVAN, DORIS	01
443205		E	04	99	JOHNSON, BRYAN B.	02
443509		E	02	99	BURROUGHS, SHIRLEY A.	01
443510		E	02	99	BURROUGHS, SHIRLEY	01
443595		E	05	99	VARGO, J. MICHAEL	01

443836	GA	PO	22	JOHNSON, BRYAN B.	01
443837	E	03	99	JOHNSON, BRYAN B.	01
444011	E	01	99	PENDLETON, KARL	01
444275	GA	PE	99	JOHNSON, BRYAN B.	02
444407	E	06	99	PHILLIPS, JOHN D., JR	01
444426	GA	PO	99	JOHNSON, BRYAN B.	01

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 444426
Ending with Case# : 448652

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
444426		GA	PO	99	JOHNSON, BRYAN B.	01
444426	A	C	01	99	JOHNSON, BRYAN B.	01
444495		GA	PE	99	DISTELHORST, MOLLY	02
444587		E	17	99	ALDEN, IRENE F.	02
444587		E	17	99	JOHNSON, BRYAM	01
444623		E	02	99	JOHNSON, BRYAN B.	01
444796		E	01	99	COFFMAN, CHERYL A.	01
444894		GA	PE	99	JOHNSON, BRYAN B.	01
445021		E	01	99	NATIONAL CITY, BANK	02
445236		GA	PE	99	JOHNSON, BRYAN B.	01
445364		GA	PE	99	JOHNSON, BRYAN B.	01
445364		GA	PE	99	JOHNSON, BRYAN B.	02
445365		E	01	99	SIMONS, IRA	01
445457		E	02	99	JOHNSON, BRYAN B.	02
445527	WC	C	04	99	EDWARDS, ROBERT	01
445654		GA	PE	99	JOHNSON, BRYAN B	01
445819		E	01	99	RILEY, IRENE B.	01
445897		GA	PO	99	JOHNSON, BRYAN B.	01
445897		GA	PO	99	JOHNSON, BRYAN B.	02
445926		GM	PO	99	SCARANTINE, SONYA R	01
445927		GM	PO	99	SCARANTINE, SONYA R	01
445929		E	03	99	JOHNSON, BRYAN B.	01
446206		E	01	99	RATCLIFF, JAMES R.	01
446273		E	01	99	EISENMAN, RICHARD L.	01
446383		E	03	99	JOHNSON, BRYAN B.	02
446383		E	03	99	KECK, ROBERT A.	01
446384		E	03	99	JOHNSON, BRYAN B.	02
446773		E	01	99	PAXTON, ROBERT C.,II	01
446995		E	03	99	JOHNSON, BRYAN B.	01
447013		E	02	99	BUTSKO, RICK	01
447115		GA	PE	99	SMITH, LESIA	01
447115		GA	PE	99	SMITH, LESIA	02
447679		E	02	99	HOPKINS, CLAUDETTE	01
447835		GA	PO	99	JOHNSON, BRYAN B.	02

447843		GA	PE	99	JOHNSON, BRYAN B.	01
447843	A	C	08	99	JOHNSON, BRYAN B.	01
447843	B	C	01	99	JOHNSON, BRYAN B.	01
447843	C	C	01	99	JOHNSON, BRYAN B.	01
448164		GA	PE	99	JOHNSON, BRYAN B.	01
448652		E	12	99	SEITZ, MICHAEL	01

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Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 448652
Ending with Case# : 451874 A

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
448652		E	12	99	SEITZ, MICHAEL	01
448653		E	04	99	ROBINSON, ALPHA R.	01
448852		E	01	99	BRADFORD, KATHRYN L.	01
448853		E	05	99	BOWENS, CAROLYN A.	01
448853		E	05	99	CASTLEBERRY, DANIEL J., II	03
448853		E	05	99	FRAZIER, PATTY A.	02
448862		GA	PO	99	JOHNSON, BRYAN B.	01
448865		E	02	99	JOHNSON, BRYAN	02
449012		E	14	99	NICKEL, MAUREEN	01
449165		E	01	99	BOWNAS, WILLIAM P.	01
449180		GA	PO	99	JOHNSON, BRYAN J.	01
449220		E	04	99	JOHNSON, BRYAN B.	01
449223		E	01	99	PHILLIPS, JOHN D.	01
449339		GA	PO	99	JOHNSON, BRYAN B.	01
449339	A	C	01	99	JOHNSON, BRYAN B.	01
449339	B	C	08	99	JOHNSON, BRYAN B.	01
449376		E	01	99	CHANG, JUANA FAY	02
449376		E	01	99	LEE, VICTOR W.	01
449409		E	01	99	ORLANDO, RALPH ALDO	01
449531		E	01	99	JOHNSON, AMANDA	01
449681		E	01	99	CHANG, JUANA FAY	01
449729		E	01	99	WISE, WINIFRED E.	01
449751		E	01	99	JOHNSON, BRYAN B.	01
449990		E	02	99	ROZANSKI, ANNA	01
450093		GA	PE	99	JOHNSON, BRYAN B.	01
450377		GA	PO	99	JOHNSON, BRYAN B.	01
450380		GA	PO	99	JOHNSON, BRYAN B.	01
450422		GA	PE	99	JOHNSON, BRYAN B.	02
450507		E	02	99	JOHNSON, BRYAN B.	01
450627		E	01	99	JOHNSON, BRYAN B.	01
450627	A	C	01	99	JOHNSON, BRYAN B.	01
451147		E	10	99	HOWARD, BEULAH V.	01
451306		GM	PE	99	OFFUTT, E. JANN	01
451474		E	01	99	REDMAN, REBECCA L.	01

451545		GA	PE	99	JOHNSON, BRYAN B.	01
451758		GA	PE	99	JOHNSON, BRYAN B.	01
451811		E	08	99	JOHNSON, BRYAN B.	01
451874		E	01	99	HOLMES, LINDA	01
451874		E	01	99	TONEY, CHERYL	02
451874	A	C	01	99	HOLMES, LINDA C/O THE ESTATE	01

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Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 451892
Ending with Case# : 455295

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
451892		GA	PE	99	GUTHRIE, JILL	01
452033		GM	EO	99	KELLAR, JOELLEN	01
452061		E	02	99	JOHNSON, BRYAN B.	01
452173		GA	PE	99	JOHNSON, BRYAN B.	01
452292		GA	PE	99	MONTGOMERY, MARTHA L.	01
452293		GA	PO	99	BAKER, GEOFFREY	02
452293		GA	PO	99	JOHNSON, BRYAN B.	03
452326		GA	PE	99	JOHNSON, BRYAN B.	02
452429		GA	PO	99	HANAWALT, TAMMY	01
452499		E	09	99	DOUGLAS, RUTH A.	01
452613		E	10	99	BRINKER, HENRY J.	01
452694		GA	PE	99	JOHNSON, BRYAN B.	01
452722		GA	PO	22	CLARK, THOMAS L.	01
453090		T	SN	99	JOHNSON, BRYAN B.	01
453283		E	02	99	JOHNSON, BRYAN B.	01
453362	WC	C	04	99	RUSSELL, ANNA	01
453444		E	03	99	JOHNSON, BRYAN B.	01
453493		E	06	99	LANG, LARRY E.	01
453496		GM	EO	42	MULLINS, TIMOTHY	01
453496	A	C	02	99	MULLINS, TIMOTHY	01
454103		M	MS	99	KELLAR, JOELLEN	01
454280		GA	PE	99	JOHNSON, BRYAN B.	01
454322		T	IV	99		01
454322	A	C	02	99	JOHNSON, BRYAN B.	01
454419		E	01	99	JOHNSON, BRYAN B.	01
454681		GA	PE	99	JOHNSON, BRYAN B.	01
454826		GA	PE	99	JOHNSON, BRYAN B.	03
454826	A	C	01	99	JOHNSON, BRYAN B.	01
454869		E	02	99	HOLCOLM, PAMELA	01
454869	A	C	08	99	HOLCOMB, PAMELA K.	01
455046		GA	PE	99	JOHNSON, BRYAN B.	01
455046		GA	PE	99	JOHNSON, BRYAN B.	02
455046	A	C	08	99	JOHNSON, BRYAN B.	01
455047		GA	PE	23	JOHNSON, BRYAN B.	01

455068		GA	PE	99	JOHNSON, BRYAN B.	01
455068	A	C	02	99	JOHNSON, BRYAN B.	01
455068	B	C	01	99	JOHNSON, BRYAN B.	01
455187		E	10	99	SWOBODA, KATHRYN R.	01
455295		GA	PE	99	JOHNSON, BRYAN B.	01
455295		GA	PE	99	JOHNSON, BRYAN B.	02

Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 455295
Ending with Case# : 457213 A

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
455295		GA	PE	99	JOHNSON, BRYAN B.	01
455295		GA	PE	99	JOHNSON, BRYAN B.	02
455296		GA	PO	99	JOHNSON, BRYAN B.	01
455333		GA	PE	99	DOTSON, SHASTA	01
455333		GA	PE	99	DOTSON, SHASTA	02
455363		E	10	99	KEITH, CHARLES L.	01
455429		GA	PO	22	MILY, NANCY J.	01
455473		GA	PE	99	JOHNSON, BRYAN B.	01
455590		GA	PE	99	JOHNSON, BRYAN B.	01
455679		E	01	99	BARRAS, PAUL E.	01
455679	A	C	01	99	BARRAS, PAUL E.	01
455702		GA	PE	99	JOHNSON, BRYAN B.	01
456034		E	02	99	JOHNSON, BRYAN B.	01
456034	A	C	01	99	JOHNSON, BRYAN B.	01
456061		E	06	99	GUSTIN, LAURA	03
456061		E	06	99	NOBIS, MARY RITA	01
456061		E	06	99	NOBIS, MARY RITA	04
456061	A	C	01	99	NOBIS, MARY RITA	01
456104		E	01	99	KESSLER, JOHN	01
456112		GA	PO	99	JOHNSON, BRYAN B.	01
456113		GA	PO	22	JOHNSON, BRYAN B.	01
456163		E	01	99	DUPLER, MYRNA	02
456163		E	01	99	PACKARD, MYRNA H	01
456191		GA	PO	99	JOHNSON, BRYAN B.	01
456191		GA	PO	99	JOHNSON, BRYAN B.	02
456286		GA	PO	99	JOHNSON, BRYAN B.	01
456287		GA	PE	99	JOHNSON, BRYAN B.	02
456287	A	C	02	99	JOHNSON, BRYAN B.	01
456292		GA	PE	10	JOHNSON, BRYAN B.	01
456350		T	TT	99	JOHNSON, BRYAN B.	01
456529		E	01	99	WILLIAMS, CHRISTINA R.	01
456529	A	C	01	99	WILLIAMS, CHRISTINA R.	01
456612		GA	PE	99	SOUDER, GEORGE E.W.	01
456645	A	C	02	99	BLANKENSHIP, CAROL A.	01

456645	A	C	02	99	DELAWARE COUNTY, BANK & TRUST	02
456832		E	01	99	PHILLIPS, JOHN D.	01
457085		E	01	99	TOOLE, MARLENE	01
457086		E	01	99	SOUDER, GEORGE E. W.	01
457213		GA	EO	99	JOHNSON, BRYAN B.	02
457213	A	C	01	99	JOHNSON, BRYAN B.	01

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 457213 B
Ending with Case# : 459020

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
457213	B	C	01	99	JOHNSON, BRYAN B.	01
457217		GA	PE	99	JOHNSON, BRYAN B.	01
457218		GA	PO	23	JOHNSON, BRYAN B.	01
457479		GA	PO	99	JOHNSON, BRYAN B.	01
457681		GA	PO	99	JOHNSON, BRYAN B.	01
457868		E	01	99	PHILLIPS, JOHN D.	02
457868		E	01	99	RUSSELL, RALSTON JR.	01
457883		GA	PE	99	JOHNSON, BRYAN B.	01
457883	A	C	01	99	JOHNSON, BRYAN B.	01
457883	B	C	08	99	JOHNSON, BRYAN B.	01
457884		GA	PE	99	JOHNSON, BRYAN B.	01
457884	A	C	01	99	JOHNSON, BRYAN B.	01
457950		GA	PE	99	JOHNSON, BRYAN B.	01
457950	A	C	01	99	JOHNSON, BRYAN B.	01
458169		GA	PO	99	JOHNSON, BRYAN B.	01
458169		GA	PO	99	JOHNSON, BRYAN B.	02
458176		GA	PO	99	GREENE, LUTHER	02
458178		GA	PO	99	JOHNSON, BRYAN B.	02
458187		E	02	00	JOHNSON, BRYAN B.	01
458187		E	02	00	JOHNSON, BRYAN B.	02
458187	A	C	08	99	JOHNSON, BRYAN B.	01
458191		GA	PE	99	JOHNSON, BRYAN B.	01
458191	A	C	08	99	JOHNSON, BRYAN B.	01
458191	B	C	01	99	JOHNSON, BRYAN B.	01
458191	C	C	08	99	JOHNSON, BRYAN B.	01
458433		GA	PO	99	KENDRICK, NORMAN	01
458433		GA	PO	99	KENDRICK, NORMAN	05
458433		GA	PO	99	KENDRICK, OPAL	02
458433		GA	PO	99	WISE, CAROLYN	04
458438		M	PO	99		01
458527		GA	PE	99	JOHNSON, BRYAN B.	01
458528		GA	PE	99	JOHNSON, BRYAN B.	01
458604		M	PA	99	JOHNSON, BRYAN B.	01
458604	A	C	08	99	JOHNSON, BRYAN B.	01

458655		GA	PE	99	JOHNSON, BRYAN B.	01
458717		E	02	99	ADDINGTON, ANDY R.	01
458775	A	C	12	99	BASNETT, JEANNETTE	01
458996		E	01	99	REDMOND, CHARLES D.	01
459019		GA	PO	23	JOHNSON, BRYAN B.	01
459020		GM	EO	99	JOHNSON, BRYAN B.	01

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FRANKLIN COUNTY PROBATE COURT
LAWRENCE A. BELSKIS, JUDGE

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 459020
Ending with Case# : 462248

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
459020		GM	EO	99	JOHNSON, BRYAN B.	01
459098		E	01	99	BENTLEY, DAISY	01
459098	A	C	01	99	BENTLEY, DAISY	01
459238		GA	PE	99	JOHNSON, BRYAN B.	01
459345		GA	PE	23	ROSE, JAMES W.	01
459551		E	04	99	NAPOLITANO, JOHN A.	01
459553		GA	PE	99	JOHNSON, BRYAN B.	01
459553		GA	PE	99	RITZ, DORIS	02
459610		GA	PO	99	JOHNSON,BRYAN	01
459617		E	04	99	JOHNSON, BRYAN B.	01
459698		GA	EO	99	JOHNSON,BRYAN B.	01
459906		E	01	99	MONTGOMERY, MARTHA LOU	01
459937		GA	PO	99	JOHNSON, BRYAN	02
459937		GA	PO	99	JOHNSON, BRYAN -(EMERGENCY)	01
460042		GA	PE	99	JOHNSON, BRYAN B.	01
460099		E	01	99	BENTLEY, DAISY	01
460179		GA	PO	99	JOHNSON,BRYAN B.	02
460282		GA	PE	99	JOHNSON, BRYAN B.	01
460282	A	C	01	99	JOHNSON, BRYAN B.	01
460558		E	02	99	JOHNSON, BRYAN B.	01
460592		E	01	99	WRIGHT, ROBERTA L.	01
460622		GA	PE	99	JOHNSON, BRYAN B.	01
460622	A	C	01	99	JOHNSON, BRYAN B.	01
460623		GA	PO	99	JOHNSON, BRYAN B.	01
460624		GA	PE	99	JOHNSON, BRYAN B.	01
460789		GA	PE	99	BOLLEN, JOELLEN	01
461145		E	01	99	MCGRANER, MARY ELLEN	01
461146		E	01	99	JOHNSON, BRYAN B.	01
461168		E	10	99	JOHNSON, BRYAN B.	01
461198		GA	PE	99	JOHNSON, BRYAN B.	02
461198		GA	PE	99	JOHNSON,BRYAN B.	01
461220		E	01	99	KAKABAR, JOSEPH KELLY	01
461468		GA	PO	99	JOHNSON, BRYAN B.	01
461490		E	02	99	VALENTINE, WILBUR	01

461490	A	C	01	99	VALENTINE, WILBUR	01
461582		E	01	99	BROWN, JEFFREY A.	01
461651		GA	PO	99	JOHNSON, BRYAN B.	01
462059		E	04	99	JOHNSON, BRYAN B.	01
462186		E	10	99	JOHNSON, BRYAN B.	01
462248		E	04	99	JOHNSON, BRYAN B.	01

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Franklin County Probate Court

Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 462248
Ending with Case# : 465450 A

Total Records: 40 << Prev Cases Next Cases >> New Search | Probate Homepage

Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
462248		E	04	99	JOHNSON, BRYAN B.	01
462249		E	01	99	KNOBLAUGH, WILLIAM B.	01
462351		E	03	99	SOBISCH, NATALIE	01
462354		GM	DW	99	FRALEY, CHRISTINE	01
462413		GA	PO	99	JOHNSON, BRYAN B.	01
462475		GA	PE	99	JOHNSON, BRYAN B.	01
462573	B	C	08	99	EVERETT, JOHN K	01
462829		GA	PE	99	JOHNSON, BRYAN B.	01
462829		GA	PE	99	JOHNSON, BRYAN B.	02
462829	A	C	01	99	JOHNSON, BRYAN B.	01
463116		GA	PE	99	JOHNSON, BRYAN B.	01
463116		GA	PE	99	JOHNSON, BRYAN B.	02
463116	A	C	01	99	JOHNSON, BRYAN B	01
463206		GA	PO	99	JOHNSON, BRYAN B.	01
463208		GA	PE	99	JOHNSON, BRYAN B.	01
463208	A	C	01	99	JOHNSON, BRYAN B.	01
463239		GA	PO	22	JOHNSON, BRYAN B.	01
463242		GA	PE	99	JOHNSON, BRYAN B.	01
463259		M	MS	99	FRALEY, CHRISTINE	01
463372		E	01	99	BIVENS, HARRY L.	02
463372		E	01	99	SPANIOL, BARBARA J.	01
463441		GA	PE	99	JOHNSON, BRYAN B.	03
463441		GA	PE	99	SLAUGHTER, STEVEN M.	02
463442		E	11	99	HOPKINS, CLAUDETTE	01
463586		GA	PE	99	HUGHES, MARK H.	01
463586	A	C	01	99	HUGHES, MARK H.	01
464023		GA	PE	99	JOHNSON, BRYAN B.	02
464023	A	C	01	99	JOHNSON, BRYAN B.	01
464255		GA	PE	99	JOHNSON, BRYAN B.	01
464255		GA	PE	99	JOHNSON, BRYAN B.	02
464255	A	C	01	99	JOHNSON, BRYAN B.	01
464416		E	02	99	JOHNSON, BRYAN B.	01
464563		GA	PE	10	JOHNSON, BRYAN B.	01
464594		E	03	99	JOHNSON, BRYAN B.	01

464623		GA	PE	99	SHEARER, CHARLES ROBERT	02
465173		GA	PE	99	DAMERON, WENDY	02
465361		GA	PE	99	JOHNSON, BRYAN B.	01
465378		E	02	99	JOHNSON, BRYAN B.	01
465450		GA	PE	99	DEAN, FRANKLIN	01
465450	A	C	02	99	DEAN, FRANKLIN C.	01

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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 465668
Ending with Case# : 470285

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
465668		E	02	99	GREEN, EDWARD A.	01
465758		GA	PE	23	OSBORNE, SANDRA A.	01
465989		E	02	99	MASDEA, LOUISE D.	01
466013		E	06	99	RILEY, ELIZABETH A.	02
466050		GA	PE	99	JOHNSON, BRYAN B.	03
466050	A	C	08	99	JOHNSTON, BRYAN B.	01
466188		E	01	99	GORDON, COLIN	01
466342		E	01	99	AIKEN, JUNE M.	01
466346		E	03	99	JOHNSON, BRYAN B.	01
466526		GA	PO	99	JOHNSON, BRYAN B	01
466573		E	02	99	BARTH, KARL L.	01
467361		E	02	99	JOHNSON, BRYAN B.	02
467388		E	01	99	REID, DONNA JEAN	01
467454		GA	PO	99	FETCH, MARY JO	01
467454	A	C	01	99	FETCH, MARY JO	01
467502		E	01	99	CLARK, FRANCES M.	01
467699		E	01	99	BAKER, THOMAS S. JR	01
467704		GA	PO	99	MEYER, RICHARD F.	01
467823		GA	PE	99	JOHNSON, BRYAN B.	01
467824		GA	PE	99	JOHNSON, BRYAN B.	01
467921		GA	PE	99	JOHNSON, BRYAN B.	01
467930		GA	PE	99	HAYES, JULIA K	01
468045		E	01	99	ACTON, MARIAN L.	01
468383		GA	PE	99	JOHNSON, BRYAN B.	01
468384		GA	PE	99	JOHNSON, BRYAN	01
468879		GA	PE	99	JOHNSON, BRYAN B.	01
468979		E	01	99	JOHNSON, BRYAN B.	01
469063		GA	PE	99	JOHNSON, BRYAN B.	01
469063	A	C	01	99	JOHNSON, BRYAN B.	01
469374		E	10	99	GATTO, LUCY	01
469597		E	01	99	BALLOU, CHARLES H.	01
469599		E	01	99	MCNAUGHTON, BRIAN A.	01
469640		M	PO	99	JOHNSON, BRYAN B.	01
469640		M	PO	99	JOHNSON, BRYAN B.	02

469641		GA	PE	99	JOHNSON, BRYAN B.	01
469874		E	01	99	BILLUPS, MARIA JULIA	01
469875		E	01	99	JOHNSON, BRYAN B.	01
469875	A	C	01	99	JOHNSON, BRYAN B.	01
470055		GA	PE	99	JOHNSON, BRYAN B	01
470285		GA	PE	99	JOHNSON, BRYAN B.	01

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FRANKLIN COUNTY PROBATE COURT
LAWRENCE A. BELSKIS, JUDGE

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 470285
Ending with Case# : 479393

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
470285		GA	PE	99	JOHNSON, BRYAN B.	01
470285	A	C	01	99	JOHNSON, BRIAN B	01
470686		E	17	99	JOHNSON, BRYAN B.	02
470775		E	01	99	LINVILLE, SHIRLEY A.	01
470783		GM	EO	99	LA CASS, SHARON	01
470815		E	02	99	WILLIAMS, ALAN	01
470917	WC	C	04	99	RIGHTER, JAMES	01
471123		E	01	99	LUTHER, GEORGE CLARK	01
471317		GA	PO	99	JOHNSON, BRYAN	01
471576		M	MS	99	LA CASS, SHARON	01
471729		GA	PE	99	NELSON, LUCY	01
471964		GA	PE	99	CAVE, CAROL	01
472175		GA	PO	99	JOHNSON, BRYAN	01
472222		GA	PE	99	JOHNSON, BRYAN B	01
472222	A	C	01	99	JOHNSON,BRYAN B.	01
473176		GM	EO	99	MATHWIG, KENDRA DAWN	01
473487		E	02	99	JOHNSON, BRYAN B.	01
473487	A	C	08	99	JOHNSON, BRYAN B.	01
473538		E	02	99	RIFE, RANDY	01
473538		E	02	99	RIFE, RANDY	02
473538	A	C	01	99	RIFE, RANDY	01
474877	WC	C	04	99	ABELON, MARLENE	01
475046		GM	DW	00	RILEY, ELIZABETH A.	01
475047		GM	DW	00	RILEY, ELIZABETH A.	01
475048		GM	DW	00	RILEY, ELIZABETH A.	01
475816		E	01	99	JOHNSON, BRYAN B.	02
475816	WC	C	04	99	LINDSELL, MARC A.	01
476432		GA	PO	99	JOHNSON, BRYAN B	01
476894		GA	PE	10	JOHNSON, BRYAN B	01
476894	A	C	01	99	JOHNSON, BRYAN B	01
477052		GA	PE	99	GILLESPIE, AL	02
477269		E	14	99	RIGHTER, JAMES M.	01
477269		E	14	99	RIGHTER, JAMES M.	02
477826		E	08	99	RINGLE, JOHN C.	01

478276		GA	PO	22	JOHNSON, BRYAN	01
478277		E	02	99	JOHNSON, BRYAN B.	01
478277	A	C	01	99	JOHNSON, BRYAN B	01
478290		E	01	99	BRINKER, THOMAS H	01
479088		GA	PE	99	NAPIER, VINCENT M	01
479393		GA	PE	99	JOHNSON, BRYAN B	01

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FRANKLIN COUNTY PROBATE COURT
LAWRENCE A. BELSKIS, JUDGE

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 479393
Ending with Case# : 501386

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
479393		GA	PE	99	JOHNSON, BRYAN B	01
479832		E	01	99	MONTEL, SARAH	01
479833		E	02	99	JOHNSON, BRYAN E.	01
479833	A	C	01	99	JOHNSON, BRYAN B.	01
480839		E	02	99	JOHNSON, BRYAN B.	01
480839	A	C	01	99	JOHNSON, BRYAN B	01
482479		E	02	99	JOHNSON, BRYAN B.	01
485768		E	01	99	JOHNSON, BRYAN B	01
485768	A	C	03	99	JOHNSON, BRYAN B.	01
486838		E	02	99	JOHNSON, BRYAN B.	01
486839		E	02	99	JOHNSON, BRYAN B	01
488114		E	02	99	SALLEY, DENSIL LEE	01
488190		GM	DW	99	HUBER, TODD E.	01
488190		GM	DW	99	HUBER, TODD E.	02
488679		E	04	99	MORTIMER, PAMELA ANNE	01
489632		E	01	99	CIEPLY, JAMES	01
490543		E	01	99	JOHNSON, BRYAN B	01
490769		E	01	99	BURNS, PATRICK G.	01
490839		GA	PO	99	JOHNSON, BRYAN B.	01
491081		E	02	99	WILSON, BRENDA C.	01
491470		E	01	99	LOCKLEAR, ROBERT E.	01
492729		E	01	99	JOHNSON, BRYAN B.	01
492729	A	C	05	99	JOHNSON, BRYAN B.	01
493901	WC	C	04	99	HENDERSHOT, THOMAS J.	01
494708	A	C	08	99	TALMAGE, KATHLEEN	01
496211		E	01	99	WARD, BERYL U.	01
498123		E	01	99	MURPHY, NAOMI	02
498123	A	C	01	99	GRIM, DEBORAH	02
498123	A	C	01	99	MURPHY, NAOMI	01
498281		E	01	99	BRINKER, THOMAS H.	01
499000	WC	C	04	99	LUCERO, NANCI E SCHEITHAUER	01
499366		E	01	99	KAHN, MARY	02
499366		E	01	99	MC CORMICK, TRISTAN A.	01
499440		E	02	99	JOHNSON, BRYAN B.	02

499487	A	C	01	99	LACY, JONDA K.	01
500071		E	01	99	MC CLEER, MARY E.	01
500233		E	04	99	JOHNSON, BRYAN B.	01
501011		E	01	99	MASE, ELIZABETH	01
501083		E	02	99	ROSS, ADRIENNE	01
501386		E	01	99	SLACK, SHARON J.	01

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FRANKLIN COUNTY PROBATE COURT
LAWRENCE A. BELSKIS, JUDGE

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 501386
Ending with Case# : 521256

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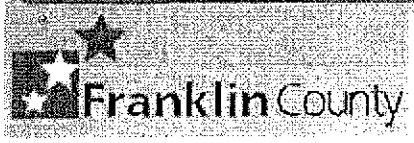
Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
501386		E	01	99	SLACK, SHARON J.	01
501499		E	01	99	DAVIDSON, PATRICIA	01
501712		E	01	99	JOHNSON, BRYAN B.	02
501712		E	01	99	PHILLIPS, JOHN D.	01
502404		E	01	99	ROGERS, EDITH	01
502416		E	02	99	JOHNSON, BRYAN B.	01
503196		E	03	99	JOHNSON, BRYAN B.	01
503663		E	04	99	POLLOCK, CHARLES E.	01
504189		E	01	99	BROWN, PATRICE M.	01
505197		GM	PO	99	PRINES, KATHLEEN	01
505366		GA	PE	99	SAMPSON, PATRICIA	01
505366	A	C	01	99	SAMPSON, PATRICIA	01
505647		E	05	99	WARNER, JAMIE	01
505805		E	01	99	JOHNSON, BRYAN B.	02
505805		E	01	99	PHILLIPS, JOHN	01
507447		E	01	99	JOHNSON, BRYAN B.	01
507447	A	C	01	99	JOHNSON, BRYAN B.	01
507923		E	01	99	BITONTE, A. JOSEPH	02
507998		GA	PE	99	MONTGOMERY, CHRISTINA L.	01
508542		E	09	99	JOHNSON, BRYAN B.	01
508909		E	01	99	CRABB, JOANNE	02
508909		E	01	99	DITTIACUR, DENNIS	01
510084		E	01	99	ADAMS, NATHANIEL A.	01
510620		E	01	99	LEATHERMAN, ALFRED F.	01
511728	A	C	01	99	CAMM, THOMAS A.	01
511738		T	WD	22	WARNER, JAMIE	01
511739		T	WD	22	WARNER, CATHERINE ANN	01
513703	A	C	01	99	JOHNSON, BRYAN B	01
515021		E	02	99	JOHNSON, BRYAN B.	01
515021	A	C	01	99	JOHNSON, BRYAN	01
515065	WC	C	04	99	SHORT, JAMES R.	01
516080		E	09	99	RUSSELL, MARY LOUISE	01
518254		E	10	99	FUNK, ALVIN H.	01
521256		E	10	99	PAGE, JOANNA Z.	01



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Franklin County Probate Court
Lawrence A. Belskis, Judge

Lawrence A. Belskis
Judge

Attorney/Case# Index

Cases for Attorney: JOHNSON, BRYAN B. (0003981)
Selection Criteria: Case Type: ALL Sub Type: ALL Status: ALL
Starting with Case# : 521256
Ending with Case# : 521256

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Case Number	Case Suffix	Type	SubType	Status	Fiduciary Name	Fid. No.
521256		E	10	99	PAGE, JOANNA Z.	01

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