

**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.

Article Addressed to:  
Methy James Stanley  
380 Park Av. #2B  
Mountain View, CA  
94043

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
X [Signature]  
B. Received by (Printed Name) C. Date of Delivery  
[Signature] 01/21/11  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.  
4. Restricted Delivery? (Extra Fee)  Yes

Article Number  
Transfer from service label) 7008 0150 0002 6972 3370  
Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**SENDER: COMPLETE THIS SECTION**

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1. Article Addressed to:  
JUSTIA INC.  
A/A CSS SERV. OF NEVADA, INC  
2215-B RENAISSANCE DR.  
Las Vegas, NV 89119

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
X [Signature]  
B. Received by (Printed Name) C. Date of Delivery  
[Signature] 1/20/11  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

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) 7005 0390 0001 9768 0454  
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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1. Article Addressed to:  
Justice Shelton  
109 North Eighth St.  
Richmond, VA  
23219

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
Brown - Clerk's Office  
B. Received by (Printed Name) C. Date of Delivery  
Cheryl Brown - Clerk's Office 10/20/11  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

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) 7005 0390 0001 9765 8194  
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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1. Article Addressed to:  
 Kenneth T. Coccimelli  
 ATTY General of Virginia  
 900 East Main St.  
 Richmond, VA 23219

2. Article Number  
 (Transfer from service label) 7008 0150 0002 6972 3400

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee  
**X RECEIVED**

B. Received by (Printed Name)  
 JUL 28 2011

C. Date of Delivery

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

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

4. Restricted Delivery? (Extra Fee)  Yes

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1. Article Addressed to:  
 Justin Shelton  
 109 North Eighth St.  
 Richmond, VA 23219

2. Article Number  
 (Transfer from service label) 7008 0150 0002 6972 3387

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee  
 Daphne Brown - Clerk's Office

B. Received by (Printed Name)  
 Daphne Brown - Clerk's Office

C. Date of Delivery  
 7/28/11

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

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

4. Restricted Delivery? (Extra Fee)  Yes

**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.
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1. Article Addressed to:  
 Timothy James Stanley  
 3929 Pemberton Dr.  
 Ann Arbor, MI 48105

2. Article Number  
 (Transfer from service label) 7005 0390 0001 9765 7982

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee  
**X Stanley**

B. Received by (Printed Name)

C. Date of Delivery  
 6-26-11

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

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

4. Restricted Delivery? (Extra Fee)  Yes

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Cynthia L. McCoy  
 109 North Eighth St.  
 Richmond, VA.  
 23219

2. Article Number  
(Transfer from service label)

7008 0150 0002 6972 3394

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Cheryl Brown - Clerk's Office  Agent  
 Addressee

B. Received by (Printed Name)  
 Cheryl Brown - Clerk's Office

C. Date of Delivery  
 7/28/11

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

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

4. Restricted Delivery? (Extra Fee)  Yes

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clerk, U.S. District Court  
 101 W. Lombard St  
 Baltimore, Md.  
 21201

2. Article Number  
(Transfer from service label)

7011 1150 0000 1938 9697

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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

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

4. Restricted Delivery? (Extra Fee)  Yes



JAMES F. REDDING  
 P.O. BOX 3411  
 WASHINGTON, D.C. 20010

CSS  
 2215-  
 LAS V

**CERTIFIED MAIL™**



7008 0150 0002 6972 3455  
 7008 0150 0002 6972 3455

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

For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Sent to: Justice, Inc. - R/A CSS Service of Nev  
 Street, Apt. No. 2215-B Renaissance Dr  
 City, State, ZIP+4 Las Vegas, NV 89119

PS Form 3800, August 2006 See Reverse for Instructions

Inc.