

9589 0710 5270 1265 0508 06

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

\$

370 County Road LLC
c/o Eric Crisler
1508 W. 30th Street
Austin, TX 78703

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1265 0507 76

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

Patricia Ashley
142 Fearing Hill Road
W. Wareham, MA 02576

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1265 0508 13

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

Gerard C, Lorusso & Henry G Grilli
TR County Rd 2004 Realty Trust
c/o Jimmy Hanelin
230 South Street
Plainville, MA 02762

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1265 0507 83

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

Michael E. Healey
404 County Road
W. Wareham, MA 02576

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1265 0508 20

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

Walter S. Wolcott
Donna M. Wolcott
520 County Road
W. Wareham, MA 02576

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1265 0507 90

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

418 County Road, LLC.
1667 Central Street
Stoughton, MA 02072

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1265 0508 68

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OFFICIAL USE

Certified Mail Fee		
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

**Christopher J Roy
 Colleen L Roy
 440 County Road
 W. Wareham, MA 02576**

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

9589 0710 5270 1265 0508 37

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Certified Mail Fee		
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

**Ellen Harju
 370 County Road
 W. Wareham, MA 02576**

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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9589 0710 5270 1265 0508 75

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Certified Mail Fee		
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

**Patricia H Zimmer Life Estate
 370 County Road
 W. Wareham, MA 02576**

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

9589 0710 5270 1265 0508 44

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OFFICIAL USE

Certified Mail Fee		
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

**Joshua J Casey
 Jessica Lynn Casey
 402 County Road
 W. Wareham, MA 02576**

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

9589 0710 5270 1265 0508 82

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OFFICIAL USE

Certified Mail Fee		
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

**Cassi L. Belli
 336 County Road
 W. Wareham, MA 02576**

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

9589 0710 5270 1265 0508 51

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OFFICIAL USE

Certified Mail Fee		
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

**Donald Homer Peltier
 Nancy Lee Peltier
 444 County Road
 W. Wareham, MA 02576**

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

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

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ _____
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____
Postage

Postmark
Here

Joseph Furtado
Jennifer Furtado
11 Fellowship Cir
W. Wareham, MA 02576

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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CERTIFIED MAIL® RECEIPT
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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ _____
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____
Postage

Postmark
Here

Eagle Holt Company Inc
PO Box 308
W. Wareham, MA 02571

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Eagle Holt Company Inc
 PO Box 308
 W. Wareham, MA 02571



9590 9402 8536 3186 2430 67

2. Article Number (Transfer from service label)

9589 0710 5270 1622 8685 01

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Eith M...*

- Agent
- Address

B. Received by (Printed Name)

C. Date of Deliv

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Priority Mail Express
- Registered Mail™
- Registered Mail Rest Delivery
- Signature Confirmati
- Signature Confirmati Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

370 County Road LLC
 c/o Eric Crisler
 1508 W. 30th Street
 Austin, TX 78703



9590 9402 8469 3186 7396 20

2. Article Number (Transfer from service label)

9589 0710 5270 1265 0508 06

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

- Agent
- Address

B. Received by (Printed Name)

C. Date of Deliv

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Priority Mail Express
- Registered Mail™
- Registered Mail Rest Delivery
- Signature Confirmati
- Signature Confirmati Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Joshua J Casey
 Jessica Lynn Casey
 402 County Road
 W. Wareham, MA 02576



9590 9402 8469 3186 7395 83

2. Article Number (Transfer from service label)

9589 0710 5270 1265 0508 44

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Joshua Casey*

- Agent
- Address

B. Received by (Printed Name)

C. Date of Deliv


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


3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Priority Mail Express
- Registered Mail™
- Registered Mail Rest Delivery
- Signature Confirmati
- Signature Confirmati Restricted Delivery

Domestic Return Rec

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Address</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Joseph Furtado Jennifer Furtado 11 Fellowship Cir W. Wareham, MA 02576</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
 <p>9590 9402 8536 3186 2430 74</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1265 0508 99</p>	<p>Mail Restricted Delivery</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Address</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Walter S. Wolcott Donna M. Wolcott 520 County Road W. Wareham, MA 02576</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
 <p>9590 9402 8469 3186 7396 06</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1265 0508 20</p>	<p>Mail Restricted Delivery</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Address</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Christopher J Roy Colleen L Roy 440 County Road W. Wareham, MA 02576</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
 <p>9590 9402 8469 3186 7395 69</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1265 0508 10</p>	<p>Mail Restricted Delivery</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
Gerard C, Lorusso & Henry G Grilli
TR County Rd 2004 Realty Trust
c/o Jimmy Hanelin
230 South Street
Plainville, MA 02762



9590 9402 8469 3186 7396 13

2. Article Number (Transfer from service label)
9589 0710 5270 1265 0508 13

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Bette Dwyer* Agent Address

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 Priority Mail Express
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
Cassi L. Belli
336 County Road
Wareham, MA 02576



9590 9402 8536 3186 2430 81

2. Article Number (Transfer from service label)
9589 0710 5270 1265 0508 82

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Address

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 Priority Mail Express
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
418 County Road, LLC.
100 Street
Wareham, MA 02576



9590 9402 8469 3186 7396 37

2. Article Number (Transfer from service label)
9589 0710 5270 1265 0507 90

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

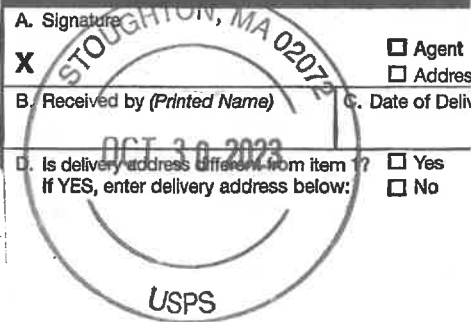
COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Address

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 Priority Mail Express
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

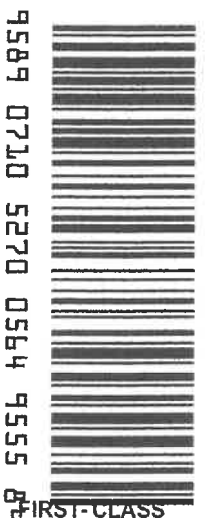




TOWN OF WAREHAM
 Planning Department
 54 Marion Road
 Wareham, Massachusetts 02571

9B 1A-23

George Wymne
 Mary Wymne
 525 County Rd
 Marion, MA 02738



US POSTAGE with PITNEY BOWES
 ZIP 02571
 02 7H
 0006152076
\$ 008.530
 SEP 28 2023

NIXIE 915 DE 1 0010/26/23

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

UNCLAMS BC: 02571147399 *0122-04297-28-46

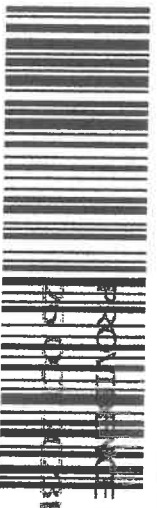


TOWN OF WAREHAM
 Planning Department
 54 Marion Road
 Wareham, Massachusetts 02571

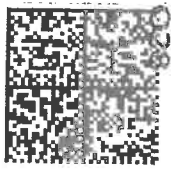
9B 1A-23

Michael E. Healey
 404 County Road
 Wareham, MA 02575

22
 NOV - 2 2023



FIRST CLASS



US POSTAGE with PITNEY BOWES
 ZIP 02571
 02 7H
 0006152076
\$ 008.530
 OCT 26 2023

9589 0710 5270 1265 0507 83

NIXIE 915 DE 1 0011/16/23

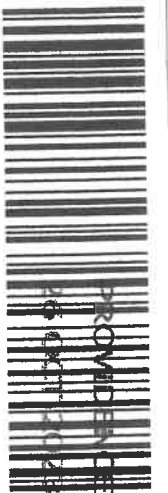
RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

UNC BC: 02571147399 *1522-05407-26-41

*Ann
 10/28/23*



TOWN OF WAREHAM
 Planning Department
 54 Marion Road
 Wareham, Massachusetts 02571



PROVIDENCE RI
 16 OCT 2023 PM

9589 0710 5270 1265 0508 37



US POSTAGETM PITNEY BOWES
 ZIP 02571
 02 7H
 0006152076 OCT 26 2023
\$ 008.530

Ellen Harju
 370 County Road
 W. Wareham, MA 02576

PB 19/23

NIXIE 015 DE 1

0911/16/23

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

UNC 02571147399

BC: 02571147399

*1522-05449-26-41

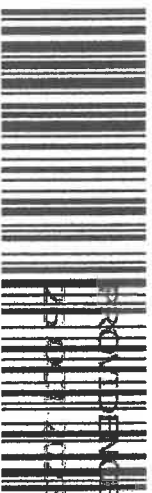
NOV 2 2023

*JMM
 10/28/23
 left
 3849*

CERTIFIED MAIL[®]



TOWN OF WAREHAM
 Planning Department
 54 Marion Road
 Wareham, Massachusetts 02571



PROVIDENCE RI
 25 OCT 2023 PM

9589 0710 5270 1265 0507 76



US POSTAGETM PITNEY BOWES
 ZIP 02571
 02 7H
 0006152076 OCT 26 2023
\$ 008.530

Patricia Ashley
 142 Fearing Hill Road
 W. Wareham, MA 02576

PB 19-23

NIXIE 015 DE 1

0911/16/23

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

UNC 02571147399

BC: 02571147399

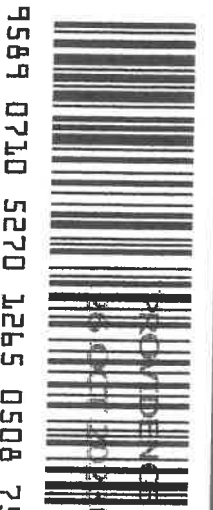
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2006 02 130

27A



TOWN OF WAREHAM
 Planning Department
 54 Marion Road
 Wareham, Massachusetts 02571



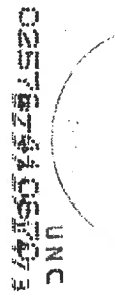
PROVIDENCE
 16 OCT 2023 PM 4:08
 FIRST CLASS



US POSTAGE
 (M) PITNEY BOWES
 ZIP 02571
 02 7H
 0006152076
\$ 008.530
 OCT 26 2023

Patricia H Zimmer Life Estate
 370 County Road
 W. Wareham, MA 02576

Handwritten: JHM 10/28/23
 WJ 3849
 10/19/23
 22



UNC BC: 02571147399 *1522-05382-26-41
 MIXIE 015 DE 1 0011/16/23
 RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

SENDER - COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 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:
 Donald Homer Peltier
 Nancy Lee Peltier
 444 County Road
 W. Wareham, MA 02576

9590 9402 8469 3186 7395 76



2. Article Number (Transfer from service label)
 9589 0710 5270 1265 0508

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Handwritten Signature Addressee
 B. Received by (Printed Name) C. Date of Delivery
Donald Peltier 10/28/23
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt