

USPS TRACKING #



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American Tower Corporation
Attn: Taylor Lovely, Zoning
10 Presidential Way
Woburn, MA 01801



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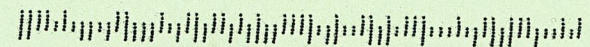
9590 9402 6982 1225 2199 51

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SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ 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.		A. Signature ☒ Agent ☐ Addressee	
1. Article Addressed to: Marion + Dorothy Simpson Trust 4104 NE Swanee Dr. Lees Summit, MO 64064		B. Received by (Printed Name) Marion Simpson	
2. Article Number (Transfer from service label) 7021 2720 0000 1406 8495		C. Date of Delivery APR 21 2025	
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 (over \$500)		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ 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.		A. Signature ☒ Agent ☐ Addressee	
1. Article Addressed to: Property Reserve Inc. PO Box 511196 Salt Lake City, UT 84151		B. Received by (Printed Name) Torann Bender	
2. Article Number (Transfer from service label) 7021 2720 0000 1406 8556		C. Date of Delivery 4/21/25	
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 (over \$500)		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ 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.		A. Signature ☒ Agent ☐ Addressee	
1. Article Addressed to: Killian Jerry D + Annetta L - Trustees 1220 NE Woods Chapel Rd. Lees Summit, MO 64064		B. Received by (Printed Name)	
2. Article Number (Transfer from service label) 7021 2720 0000 1406 8471		C. Date of Delivery	
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 (over \$500)		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	

Domestic Return Receipt

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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:

Helicat Investments Inc
4121 NE Port Dr.
Lee's Summit, MO
64064



9590 9402 6982 1225 2199 68

2. Article Number (Transfer from service label)

7021 2720 0000 1406 8464

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Helicat

☐ 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

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☒ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Collect on Delivery Restricted Delivery | |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

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:

Richard + Cynthia Mendenhall
4100 NE Swanee Dr.
Lee's Summit, MO
64064



9590 9402 6982 1225 2199 44

2. Article Number (Transfer from service label)

7021 2720 0000 1406 8488

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Cynthia Mendenhall

☐ 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

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☒ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Collect on Delivery Restricted Delivery | |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

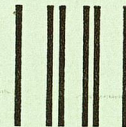
Domestic Return Receipt

USPS TRACKING#



KANSAS CITY 640

21 APR 2025 PM 3 L



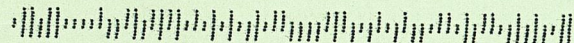
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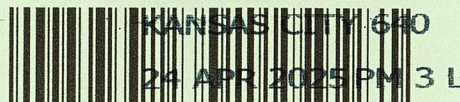
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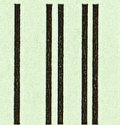


USPS TRACKING#



KANSAS CITY 640

24 APR 2025 PM 3 L



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