

7022 3330 0000 0378 8127

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**East Lyme, CT 06333**

Certified Mail Fee	\$4.40	0333
Extra Services & Fees (check box, add fee as appropriate)	\$3.65	08
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To: **Gesick Leigh & Kathleen**  
Street and Apt. No., or PO Box No.: **113 Scott Rd**  
City, State, ZIP+4®: **East Lyme, CT 06333**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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**New Haven, CT 06510**

Certified Mail Fee	\$4.40	0333
Extra Services & Fees (check box, add fee as appropriate)	\$3.65	08
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To: **Sheffield Scientific**  
Street and Apt. No., or PO Box No.: **2 Whitney Ave 6th FL**  
City, State, ZIP+4®: **New Haven, CT 06510**

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**East Lyme, CT 06333**

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<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To: **East Lyme Land Trust INC**  
Street and Apt. No., or PO Box No.: **PO Box 831**  
City, State, ZIP+4®: **East Lyme, CT 06333**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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**East Lyme, CT 06333**

Certified Mail Fee	\$4.40	0333
Extra Services & Fees (check box, add fee as appropriate)	\$3.65	08
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To: **Hacks Mills Burial Assoc.**  
Street and Apt. No., or PO Box No.: **291 N Bride Brook Rd**  
City, State, ZIP+4®: **East Lyme, CT 06333**

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**Dover, DE 19901**

Certified Mail Fee	\$4.40	0333
Extra Services & Fees (check box, add fee as appropriate)	\$3.65	08
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To: **Hathaway Farm LLC**  
Street and Apt. No., or PO Box No.: **8 the Green Suite 4647**  
City, State, ZIP+4®: **Dover, DE 19901**

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**Niantic, CT 06357**

Certified Mail Fee	\$4.40	0333
Extra Services & Fees (check box, add fee as appropriate)	\$3.65	08
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.68	
<b>Total Postage and Fees</b>	<b>\$8.73</b>	

Sent To: **Granger Gary F. Jr. &**  
Street and Apt. No., or PO Box No.: **98 Lake View Heights**  
City, State, ZIP+4®: **Niantic, CT 06357**

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