PROOF OF SERVICE

_	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
	Complete items 1, 2, and 3. Also complete	(☐ Agent	
	item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Two famble - Addressee	
	so that we can return the card to you. Attach this card to the back of the mailpiece,	CAND FORMURIC CONDITION	
_	or on the front if space permits.	D. Is delivery address different from Item 1? Yes	
	1. Article Addressed to:	If YES, enter delivery address below: ☐ No	
	Glenn (Bear) Chaney Benton County Tax Assessor		
	Admin. Bldg., 215 E. Central Street	3, Service Type Certified Mail Express Mail	
_	Bentonville, AR 72712	Registered Return Receipt for Merchandise	
		☐ Insured Mail ☐ C.O.D.	
	1	4. Restricted Delivery? (Extra Fee)	
	2. Article Number 7013	7090 0005 SPA2 7P70	
	PS Form 3811, February 2004 Domestic R	eturn Receipt 102596-02-M-1540	
M	I am the plaintiff or an attorney of record for the plaintiff in this lawsuit, and I		
	served the summons, complaint, declaration of taking, and order of possession on		
	the defendant by certified mail, return receipt requested, restricted delivery, as		
	shown by the attached signed return rece	ipt.	
	Shown of the analysis and		
	I am the plaintiff in this lawsuit, and I m	ailed a copy of the summons and	
	complaint by first-class mail to the defendant together with two copies of a notice		
	and acknowledgment and received the ar	tached notice and acknowledgment form	
	within twenty days after the date of mail	ing.	
	Other [specify]:		
П	I was unable to execute service because:		
-			
	No. Co. in C		
	My fee is \$	_ c 201	
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		DA DA	
		FILED 2015 AUG 20 AM 10 2 BRENDA DESHIELDS CLERK AND RECORDE BENTON COUNTY, AR	
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