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MAY 16 2023
J. Hillary Conklin
Tisbury Town Clerk

Tisbury Public Hearing Notice

The Tisbury Select Board will hold a public hearing on Wednesday, June 28, 2023 at 4:45 PM. to review and consider an application for a new Moped License for Island Adventure Rentals Inc., 19 Beach Road. This public hearing will be held in a Hybrid Format. The Public can attend and participate in the hearing by joining scheduled Zoom meeting via <https://us06web.zoom.us/j/89026259964> Meeting ID: 890 2625 9964 Passcode: 022081 Onetap mobile+1 646 8769923 US (New York) and in person at Katharine Cornell Theater, 51 Spring Street, Tisbury.

Full hearing materials are available for public inspection at the Select Board Office, 115 High Point Lane during regular business hours and online at: <https://www.tisburyma.gov/board-selectmen/pages/public-hearings>. If you are unable to attend the hearing, please feel free to address your comments and/or concerns to the Tisbury Select Board, Box 1239, Vineyard Haven, MA 02568 or via email to edefoe@tisburyma.gov.



TOWN OF TISBURY
OFFICE OF THE SELECTMEN
P.O. BOX 1239 – 51 SPRING STREET
VINEYARD HAVEN, MASSACHUSETTS 02568
TEL: (508) 696-4200
FAX: (508) 693-5876
www.tisburyma.gov

MOPED LICENSE APPLICATION PACKET

Required Documents Check Off List

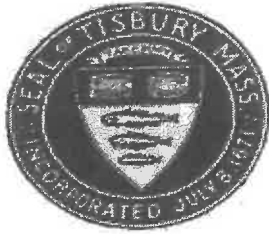
Following must be submitted together with your completed application:

- Revenue Enforcement and Protection (REAP) Attestation
- Workers' Compensation Insurance Affidavit
- Certificate of Liability Insurance
- Inventory Checklist
- Payment in amount of \$850.00. Payments can be made via check made out to the Town of Tisbury or Credit Card at the Board of Selectmen Office (additional Credit Card Charge of 3% will apply)

Incomplete applications will delay the processing period.

Submit by mail: Town of Tisbury
Attn.: Board of Selectmen Office
P.O. Box 1239,
Vineyard Haven, MA, 02568

Submit in Person: Tisbury Town Hall
Katherine Cornell Theater
51 Spring Street,
Tisbury, MA, 02568



Town of Tisbury

General License Application

Please return this form with:

All applicable Attachments & Fees

to the
Licensing Office
Town of Tisbury
(508) 696-4202

New Renewal (circle one)

Date application submitted: _____

(please fill out all fields below:)

Type of License/Business: moped rentals

Applicant/ Business Name: Island Adventure Rentals Inc.

(please include Corporate, Llc., or d/b/a info as well as business name) Adventure Rentals (dba)

Address of Business Operation: 19 Beach Bd.

Mailing Address: P.O. Box 186

Email: _____

Cell phone: 401-474-8973

Name of Individual Applying: Erin Leone

Print Name: Erin Leone

Signature: EL

Please state clearly below purpose for which license is requested:

Rental of mopeds

FOR ALL NEW APPLICATIONS ONLY:

YES Did you receive a copy of the applicable licensing regulations?

_____ APPLICATION FEE

_____ ANNUAL LICENSE FEE (if license is granted)

_____ HEARING DATE

Internal:

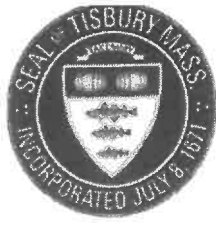
Advertisement placed on what date: _____ Publication(s): _____

REAP rec'd? _____

Inspections? _____

Insurance forms/ waivers? _____

Bond (if req.) _____



TAXI LICENSE INVENTORY CHECKLIST

Business Name _____ Permit Year _____

Number of Vehicle's _____

List All Vehicle's Makes And Models

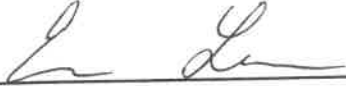
Make	Model	Year	Quantity
Kymco	Cubo	2020	
↓	↓	↓	

Applicant's Signature *E L* Date 4/24/23

MASSACHUSETTS DEPARTMENT OF REVENUE

REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.



*Signature of Individual or Corporate Name (Mandatory)



by: Corporate Officer (Mandatory, if applicable)

**Social Security # (Voluntary) or Federal Identification Number

*This license will not be issued unless this certification clause is signed by the applicant.

**Your Social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or evocation. This request is made under the authority of MA G.L. c 62C s. 49A.



ISLAN-5

OP ID: MC

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/31/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

508-679-6486

PRODUCER
Durfee Buffinton Ins. Agcy, Inc
377 Second Street
Fall River, MA 02721
Walter A. Brown III

CONTACT NAME: Walter A. Brown III

PHONE (A/C, No, Ext): 508-679-6486

FAX (A/C, No):

E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : Atlantic Casualty Insurance Co

INSURER B :

INSURER C :

INSURER D :

INSURER E :

INSURER F :

INSURED
Island Adventure Rentals LLC
P.O. Box 186
Vineyard Haven, MA 02568

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			L261006220-0	07/12/2022	07/12/2023	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ Included
							COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
							EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
							PER STATUTE	
							OTH-ER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

TOWNTIS

Town of Tisbury
P.O. Box 1239
51 Spring Street
Vineyard Haven, MA 02568

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Walter A. Brown



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/19/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Automatic Data Processing Insurance Agency, Inc. 1 Adp Boulevard Roseland NJ 07068		CONTACT NAME: Automatic Data Processing Insurance Agency, Inc. PHONE (A/C, No, Ext): 1-800-524-7024 E-MAIL ADDRESS:		FAX (A/C, No):	
INSURED Island Adventure Rentals Inc 25 Beach Rd Vineyard Haven MA 02568		INSURER(S) AFFORDING COVERAGE			NAIC # 42376
		INSURER A: Technology Insurance Company, Inc.			
		INSURER B:			
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			

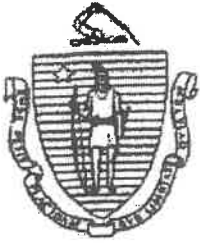
COVERAGES **CERTIFICATE NUMBER:** 2971788 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPI/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	N	TWC4253571	04/14/2023	04/14/2024 E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER Town of Tisbury 51 Spring Street Vineyard Haven MA 02568	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>[Signature]</i>
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The Commonwealth of Massachusetts
 Department of Industrial Accidents
 Office of Investigations
 1 Congress Street, Suite 100
 Boston, MA 02114-2017
 www.mass.gov/dia

100-1000

Workers' Compensation Insurance Affidavit: General Businesses

Applicant Information

Please Print Legibly

Business/Organization Name: _____

Address: _____

City/State/Zip: _____ Phone #: _____

Are you an employer? Check the appropriate box:

- 1. I am a employer with _____ employees (full and/ or part-time).*
- 2. I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3. We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**
- 4. We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

Business Type (required):

- 5. Retail
- 6. Restaurant/Bar/Eating Establishment
- 7. Office and/or Sales (incl. real estate, auto, etc.)
- 8. Non-profit
- 9. Entertainment
- 10. Manufacturing
- 11. Health Care
- 12. Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

**If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: _____

Insurer's Address: _____

City/State/Zip: _____

Policy # or Self-ins. Lic. # _____ Expiration Date: _____

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: _____ Date: _____

Phone #: _____

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License # _____

Issuing Authority (circle one):

- 1. Board of Health
- 2. Building Department
- 3. City/Town Clerk
- 4. Licensing Board
- 5. Selectmen's Office
- 6. Other _____

Contact Person: _____ Phone #: _____

Vineyard Enterprises Inc.

PO Box 3047

Oak Bluffs, MA 02557

May 30, 2022

To Whom it may concern.

We intend to enter into a sub-lease agreement with Erin Leone (or her company) at 19 beach Rd, Tisbury MA. for the purpose of renting Moped and/or Scooters when she gets the license form the town to do so.

Thank you

A handwritten signature in black ink, appearing to read "Mike Wallace", with a long horizontal flourish extending to the right.

Mike Wallace

Vineyard Enterprises Inc.

Master Tenant, 19 Beach Rd, Tisbury MA.

7022 0410 0001 4503 7453

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com
 Chicago, IL 60641

Certified Mail Fee \$4.15

Extra Services & Fees (check box)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
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 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

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 MA 02568

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 05429

Send to
 Carrothers Deborah L
 3121 N. Milwaukee Ave Unit 1
 Chicago, IL 60641

PS Form 3800, April 2018 PSN 7530-0200-9001 See Reverse for Instructions

7021 0950 0001 4455 6960

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Postage \$0.63

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Send to
 Phelan Patrick A Tr
 P.O. Box 4607
 Vineyard Haven, MA 02568

PS Form 3800, April 2018 PSN 7530-0200-9001 See Reverse for Instructions

7022 0410 0001 4503 7163

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 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

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Send to
 Sarah Lolley Inc.
 P.O. Box 1858
 Vineyard Haven, MA 02568

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 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

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 MA 02568

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Send to
 China Star Island LLC
 P.O. Box 2168
 Vineyard Haven, MA 02568

PS Form 3800, April 2018 PSN 7530-0200-9001 See Reverse for Instructions

7022 0410 0001 4503 7385

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 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

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 MAY 31 2023
 MA 02568

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Send to
 Armstrong Roger A.
 P.O. Box 4384
 Vineyard Haven, MA 02568

PS Form 3800, April 2018 PSN 7530-0200-9001 See Reverse for Instructions

7022 0410 0001 4503 7392

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 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

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 MAY 31 2023
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Send to
 Beach Hair LLC
 P.O. Box 2149
 Tisbury, MA 02568

PS Form 3800, April 2018 PSN 7530-0200-9001 See Reverse for Instructions

7022 0410 0001 4503 7408

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 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Postmark: VINEYARD HAVEN MA 02568 MAY 31 2023

Sent To: **Beach Road Properties LLC**
Street and Apt. No., or P.O. Box No. P.O. Box 1111
City, State, ZIP+4® Vineyard Haven MA 02568

PS Form 3800, April 2015 PSN 7530-0200-9007 See Reverse for Instructions

7022 0410 0001 4503 7507

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 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
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Postage \$0.63

Total Postage and Fees \$4.78

Postmark: VINEYARD HAVEN MA 02568 MAY 31 2023

Sent To: **Douglas Robert S Sr. Trust**
Street and Apt. No., or P.O. Box No. P.O. Box 429
City, State, ZIP+4® Vineyard Haven MA 02568

PS Form 3800, April 2015 PSN 7530-0200-9007 See Reverse for Instructions

7022 0410 0001 4503 7484

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Vineyard Haven, MA 02568

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 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Postmark: VINEYARD HAVEN MA 02568 MAY 31 2023

Sent To: **Destefani Valerio Luis Tr.**
Street and Apt. No., or P.O. Box No. P.O. Box 1720
City, State, ZIP+4® Vineyard Haven MA 02568

PS Form 3800, April 2015 PSN 7530-0200-9007 See Reverse for Instructions

7022 0410 0001 4503 7224

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For delivery information, visit our website at www.usps.com.
Carlisle, PA 17013

Certified Mail Fee \$4.15

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 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Postmark: VINEYARD HAVEN MA 02568 MAY 31 2023

Sent To: **Stop & Shop Supermarket**
Street and Apt. No., or P.O. Box No. P.O. Box 6500
City, State, ZIP+4® Carlisle, PA 17013

PS Form 3800, April 2015 PSN 7530-0200-9007 See Reverse for Instructions

7022 0410 0001 4503 7170

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Vineyard Haven, MA 02568

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 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Postmark: VINEYARD HAVEN MA 02568 MAY 31 2023

Sent To: **Sawyer Realty Group LLC**
Street and Apt. No., or P.O. Box No. 97 Snake Hollow
City, State, ZIP+4® Vineyard Haven MA 02568

PS Form 3800, April 2015 PSN 7530-0200-9007 See Reverse for Instructions

7022 0410 0001 4503 7231

**U.S. Postal Service™
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Domestic Mail Only

For delivery information, visit our website at www.usps.com.
Boston, MA 02116

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee):
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Postmark: VINEYARD HAVEN MA 02568 MAY 31 2023

Sent To: **Tashmo Realty LLC Trustee**
Street and Apt. No., or P.O. Box No. 20 South Beach Nominee Tr.
City, State, ZIP+4® 10 St. James Ave. Floor 11 Boston MA 02116

PS Form 3800, April 2015 PSN 7530-0200-9007 See Reverse for Instructions

7022 0410 0001 4503 7491

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: **Dockwood LLC**
 Street and Apt. No., or PO Box No.: **P.O. Box 1408**
 City, State, ZIP+4: **Vineyard Haven, MA 02568**

PS Form 3800, April 2016 PSN 7530-0200-9077 See Reverse for Instructions

7022 0410 0001 4503 7361

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 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: **31 Beach Rd. Condominium**
 Street and Apt. No., or PO Box No.: **31 Beach Rd**
 City, State, ZIP+4: **Tisbury, MA 02568**

PS Form 3800, April 2016 PSN 7530-0200-9077 See Reverse for Instructions

7022 0950 0001 4455 6942

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Edgartown, MA 02539

Certified Mail Fee	\$4.15	0523
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: **MV Five Corners Realty LLC**
 Street and Apt. No., or PO Box No.: **P.O. Box 1226**
 City, State, ZIP+4: **Edgartown, MA 02539**

PS Form 3800, April 2016 PSN 7530-0200-9077 See Reverse for Instructions

7022 0410 0001 4503 7446

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Westborough, MA 01581

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: **Cape Cod Farms Inc.**
 Street and Apt. No., or PO Box No.: **165 Flanders Rd**
 City, State, ZIP+4: **Westborough, MA 01581**

PS Form 3800, April 2016 PSN 7530-0200-9077 See Reverse for Instructions

7022 0950 0001 4455 6935

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: **MV Community Services Inc**
 Street and Apt. No., or PO Box No.: **111 Edgartown Rd.**
 City, State, ZIP+4: **Vineyard Haven, MA 02568**

PS Form 3800, April 2016 PSN 7530-0200-9077 See Reverse for Instructions

7022 0410 0001 4503 7351

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Woods Hole, MA 02543

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: **Woods Hole MV Nant Sship A.**
 Street and Apt. No., or PO Box No.: **P.O. Box 284**
 City, State, ZIP+4: **Woods Hole, MA 02543**

PS Form 3800, April 2016 PSN 7530-0200-9077 See Reverse for Instructions

7021 0950 0001 4455 6959

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
Vineyard Haven, MA 02568

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee to postage)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Sent To **Nadelstien Sanford**
Street and Apt. No., or PO Box No. **P.O. Box 4155**
City, State, ZIP+4® **Vineyard Haven, MA 02568**

MA 02568 05/31/2023

USPS 0568

VINEYARD HAVEN
MAY 31 2023

PB Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7021 0950 0001 4455 6973

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
Vineyard Haven, MA 02568

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee to postage)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Sent To **Panico Daniel J**
Street and Apt. No., or PO Box No. **P.O. Box 4367**
City, State, ZIP+4® **Vineyard Haven, MA 02568**

MA 02568 05/31/2023

USPS 0568

VINEYARD HAVEN
MAY 31 2023

PB Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7347

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
Vineyard Haven, MA 02568

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee to postage)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Sent To **Vineyard Harbor Condo Trust**
Street and Apt. No., or PO Box No. **P.O. Box 1609**
City, State, ZIP+4® **Vineyard Haven MA 02568**

MA 02568 05/31/2023

USPS 0568

VINEYARD HAVEN
MAY 31 2023

PB Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7021 0950 0001 4455 6928

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
Vineyard Haven, MA 02568

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee to postage)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Sent To **MV Beach Street Realty LLC**
Street and Apt. No., or PO Box No. **P.O. Box 1220**
City, State, ZIP+4® **Edgartown MA 02539**

MA 02568 05/31/2023

USPS 0568

VINEYARD HAVEN
MAY 31 2023

PB Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7330

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
Dedham, MA 02026

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee to postage)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Sent To **Vineyard Beach LLC**
Street and Apt. No., or PO Box No. **858 Washington St.**
City, State, ZIP+4® **Dedham, MA 02026**

MA 02568 05/31/2023

USPS 0568

VINEYARD HAVEN
MAY 31 2023

PB Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7021 0950 0001 4455 6911

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For delivery information, visit our website at www.usps.com
Vineyard Haven, MA 02568

Certified Mail Fee \$4.15

Extra Services & Fees (check box, add fee to postage)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00

Postage \$0.63

Total Postage and Fees \$4.78

Sent To **Lovewell Mark Alan**
Street and Apt. No., or PO Box No. **P.O. Box 2034**
City, State, ZIP+4® **Vineyard Haven MA 02568**

MA 02568 05/31/2023

USPS 0568

VINEYARD HAVEN
MAY 31 2023

PB Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7323 4503 4000 0410 2022

U.S. Postal Service
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 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	05/31/2023

Sent To: **United World Corp**
 Street and Apt. No., or PO Box No. **P.O. Box 4635**
 City, State, ZIP+4® **Vineyard Haven, MA 02568**

PS Form 3800, April 2016 PSN 7530-02-000-907 See Reverse for Instructions

7323 4503 4000 0410 2022

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	05/31/2023

Sent To: **Kelley Benjamin L**
 Street and Apt. No., or PO Box No. **P.O. Box 2297**
 City, State, ZIP+4® **Vineyard Haven, MA 02568**

PS Form 3800, April 2016 PSN 7530-02-000-907 See Reverse for Instructions

7316 4503 4000 0410 2022

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For delivery information, visit our website at www.usps.com
 Walpole, MA 02081

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	05/31/2023

Sent To: **United States Postal Service**
 Street and Apt. No., or PO Box No. **104 Pine St.**
 City, State, ZIP+4® **Walpole, MA 02081-2517**

PS Form 3800, April 2016 PSN 7530-02-000-907 See Reverse for Instructions

7316 4503 4000 0410 2022

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	05/31/2023

Sent To: **Island Housing Trust Corp**
 Street and Apt. No., or PO Box No. **P.O. Box 4538**
 City, State, ZIP+4® **Vineyard Haven, MA 02568**

PS Form 3800, April 2016 PSN 7530-02-000-907 See Reverse for Instructions

7309 4503 4000 0410 2022

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	05/31/2023

Sent To: **Island Color Center Inc.**
 Street and Apt. No., or PO Box No. **P.O. Box 1237**
 City, State, ZIP+4® **Vineyard Haven, MA 02568**

PS Form 3800, April 2016 PSN 7530-02-000-907 See Reverse for Instructions

7309 4503 4000 0410 2022

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For delivery information, visit our website at www.usps.com
 Foxboro, MA 02035

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	\$0.63	
Total Postage and Fees	\$4.78	05/31/2023

Sent To: **Two Wheeler Holdings LLC**
 Street and Apt. No., or PO Box No. **100 Washington St.**
 City, State, ZIP+4® **Foxboro, MA 02035**

PS Form 3800, April 2016 PSN 7530-02-000-907 See Reverse for Instructions

7022 0410 0001 4503 7251

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee \$4.15
 Extra Services & Fees (check box, and fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

Stamp: Here
 Postmark: Here
 MA 02568 05/31/2023

Sent To: **Flowerwood LLC**
 Street and Apt. No., or PO Box No.: **P.O. Box 1408**
 City, State, ZIP+4®: **Vineyard Haven, MA 02568**

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7286

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee \$4.15
 Extra Services & Fees (check box, and fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

Stamp: Here
 Postmark: Here
 MA 02568 05/31/2023

Sent To: **Tisbury Town of War Veterans Memorial Park**
 Street and Apt. No., or PO Box No.: **P.O. Box 1239**
 City, State, ZIP+4®: **Tisbury, MA 02568**

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7293

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee \$4.15
 Extra Services & Fees (check box, and fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

Stamp: Here
 Postmark: Here
 MA 02568 05/31/2023

Sent To: **Tisbury Working Waterfront**
 Street and Apt. No., or PO Box No.: **P.O. Box 1095**
 City, State, ZIP+4®: **Vineyard Haven, MA 02568**

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7262

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee \$4.15
 Extra Services & Fees (check box, and fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

Stamp: Here
 Postmark: Here
 MA 02568 05/31/2023

Sent To: **Town of Tisbury**
 Street and Apt. No., or PO Box No.: **P.O. Box 1239**
 City, State, ZIP+4®: **Tisbury, MA 02568**

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7255

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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee \$4.15
 Extra Services & Fees (check box, and fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

Stamp: Here
 Postmark: Here
 MA 02568 05/31/2023

Sent To: **Tisbury Marina LLC**
 Street and Apt. No., or PO Box No.: **278 Scranton Ave.**
 City, State, ZIP+4®: **Falmouth, MA 02540**

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7514

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee \$4.15
 Extra Services & Fees (check box, and fee as appropriate)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

Stamp: Here
 Postmark: Here
 MA 02568 05/31/2023

Sent To: **Dukes Co Regional Housing**
 Street and Apt. No., or PO Box No.: **P.O. Box 4538**
 City, State, ZIP+4®: **Vineyard Haven, MA 02568**

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7022 0410 0001 4503 7217

U.S. Postal Service
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	Here
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: Stanley Regina Trustee
 Street and Apt. No., or P.O. Box No.: P.O. Box 4729
 City, State, ZIP+4®: Vineyard Haven MA 02568

PS Form 3800, April 2015 PSN 7530-02-000-9027 See Reverse for Instructions

7022 0410 0001 4503 7200

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	Here
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: Snyder Gretchen
 Street and Apt. No., or P.O. Box No.: P.O. Box 2497
 City, State, ZIP+4®: Vineyard Haven MA 02568

PS Form 3800, April 2015 PSN 7530-02-000-9027 See Reverse for Instructions

7022 0410 0001 4503 7194

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	Here
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: Sawyer Realty Group LLC
 Street and Apt. No., or P.O. Box No.: P.O. Box 1408
 City, State, ZIP+4®: Vineyard Haven, MA 02568

PS Form 3800, April 2015 PSN 7530-02-000-9027 See Reverse for Instructions

7022 0410 0001 4503 7248

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Edgartown, MA 02539

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	Here
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: Teles Carlos
 Street and Apt. No., or P.O. Box No.: P.O. Box 3761
 City, State, ZIP+4®: Edgartown, MA 02539

PS Form 3800, April 2015 PSN 7530-02-000-9027 See Reverse for Instructions

7022 0410 0001 4503 7439

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	Here
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: C & S Abraham LLC
 Street and Apt. No., or P.O. Box No.: 133 Braeside Rd.
 City, State, ZIP+4®: Falmouth, MA 02540

PS Form 3800, April 2015 PSN 7530-02-000-9027 See Reverse for Instructions

7022 0410 0001 4503 7477

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com
 Vineyard Haven, MA 02568

Certified Mail Fee	\$4.15	0568
Extra Services & Fees (check box, add fee)	\$0.00	54
<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	Here
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.63	
Total Postage and Fees	\$4.78	

Sent To: Decker J Christopher Trust
 Street and Apt. No., or P.O. Box No.: P.O. Box 1674
 City, State, ZIP+4®: Vineyard Haven, MA 02568

PS Form 3800, April 2015 PSN 7530-02-000-9027 See Reverse for Instructions

7422 2504 0000 0100 2202

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com
 Fort Myers, FL 33907

Certified Mail Fee \$4.15
 \$0.00
 Extra Services & Fees (check box, add fee)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

MA 02568 05/31/2023

Sent To: **Buckley George E III Tr.**
 Street and Apt. No., or P.O. Box No. **Buckley Vilma A Tr. / 2121 Crystal Dr.**
 City, State, ZIP+4® **Fort Myers, FL 33907 #20**

PS Form 3800, April 2013 PSN 7530-02-000-9007 See Reverse for Instructions

7415 4503 0000 0100 2202

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Certified Mail Fee \$4.15
 \$0.00
 Extra Services & Fees (check box, add fee)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

MA 02568 05/31/2023

Sent To: **Black Dog Tavern Co Inc J**
 Street and Apt. No., or P.O. Box No. **P.O. Box 2219**
 City, State, ZIP+4® **Vineyard Haven, MA 02568**

PS Form 3800, April 2013 PSN 7530-02-000-9007 See Reverse for Instructions

7378 4504 0000 0100 2202

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Certified Mail Fee \$4.15
 \$0.00
 Extra Services & Fees (check box, add fee)
 Return Receipt (hardcopy) \$0.00
 Return Receipt (electronic) \$0.00
 Certified Mail Restricted Delivery \$0.00
 Adult Signature Required \$0.00
 Adult Signature Restricted Delivery \$0.00
 Postage \$0.63
 Total Postage and Fees \$4.78

MA 02568 05/31/2023

Sent To: **Amity Properties**
 Street and Apt. No., or P.O. Box No. **P.O. Box 2261**
 City, State, ZIP+4® **Vineyard Haven, MA 02568**

PS Form 3800, April 2013 PSN 7530-02-000-9007 See Reverse for Instructions