



Alaska Public Offices Commission



COMPLAINT

ARRIVED
6/24/2024
APOC - ANCH
PM HC FAX/ELE

FILING A COMPLAINT <i>To be accepted, complaint must include</i>	APOC LAWS ALLEGEDLY VIOLATED <i>Specify section of law or regulation</i>	APOC case name/number/date								
1. Complainant's name + contact info 2. Respondent's name + contact info 3. Laws, regulations allegedly violated 4. Description of allegations 5. Basis of knowledge of alleged facts 6. Documentation to support allegations 7. Notarized signature of the complainant 8. Proof that complaint and all supporting documents were served on respondent	<table border="1"> <tr> <td>Campaign Disclosure Law</td> <td><input checked="" type="checkbox"/> AS 15.13 <input checked="" type="checkbox"/> 2 AAC 50.250-405</td> </tr> <tr> <td>Public Official Financial Disclosure</td> <td><input type="checkbox"/> AS 39.50 <input type="checkbox"/> 2 AAC 50.680-799</td> </tr> <tr> <td>Legislative Financial Disclosure</td> <td><input type="checkbox"/> AS 24.60 <input type="checkbox"/> 2 AAC 50.680-799</td> </tr> <tr> <td>Lobbying Regulation</td> <td><input type="checkbox"/> AS 24.45 <input type="checkbox"/> 2 AAC 50.550-590</td> </tr> </table>	Campaign Disclosure Law	<input checked="" type="checkbox"/> AS 15.13 <input checked="" type="checkbox"/> 2 AAC 50.250-405	Public Official Financial Disclosure	<input type="checkbox"/> AS 39.50 <input type="checkbox"/> 2 AAC 50.680-799	Legislative Financial Disclosure	<input type="checkbox"/> AS 24.60 <input type="checkbox"/> 2 AAC 50.680-799	Lobbying Regulation	<input type="checkbox"/> AS 24.45 <input type="checkbox"/> 2 AAC 50.550-590	24-02-CD
Campaign Disclosure Law	<input checked="" type="checkbox"/> AS 15.13 <input checked="" type="checkbox"/> 2 AAC 50.250-405									
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Legislative Financial Disclosure	<input type="checkbox"/> AS 24.60 <input type="checkbox"/> 2 AAC 50.680-799									
Lobbying Regulation	<input type="checkbox"/> AS 24.45 <input type="checkbox"/> 2 AAC 50.550-590									

If complaint meets requirements for acceptance, APOC will investigate the allegations and notify the respondent of the right to respond. APOC will notify Complainant and Respondent when APOC accepts or rejects a complaint.

COMPLAINANT		RESPONDENT <i>Person or group allegedly violating law</i>	
<input type="checkbox"/> APOC <input checked="" type="checkbox"/> Person <input type="checkbox"/> Party <input checked="" type="checkbox"/> Group	Jacquelyn I Goforth	<input type="checkbox"/> Person <input type="checkbox"/> Party <input checked="" type="checkbox"/> Group	Friends of the Palmer Public Library, Inc.
Address City / Zip	PO Box 2768 Palmer, AK 99645	Address City / Zip	137 E Arctic Ave Palmer, AK 99645
Phone/Fax	907-720-9254	Phone/Fax	907-745-4690
E-mail	Jivie_58@hotmail.com	E-mail	unknown

COMPLAINANT'S REPRESENTATIVE		RESPONDENT'S REPRESENTATIVE	
<i>If complainant or respondent is political party or group, list contact person. If complainant or respondent is represented by attorney, list name + contact info</i>			
Name/Title		Prudence McKenney, President, Registered Agent	
Address		137 E Arctic Ave, Palmer AK 99645	
Phone/Fax		907-315-9285	
E-mail		Prudence155@gmail.com	

DESCRIPTION or SUMMARY of ALLEGED VIOLATION	Use extra pages if needed	SUPPORTING DOCUMENTS - DESCRIBE:
Please see attached 2 page summary.		1) Bus license 10266759; 2 & 3) APOC Registration; 4) bus lic. 2197549, née 21970D; 5 & 6) APOC Entry data for 2023 and 2024; 7 & 8 & 8a) proof of actual campaign

PROOF of SERVICE ATTACHED: Fax - receipt confirmation Certified mail - signed receipt *yes.. 6/24/2024*
 Process server - return of service E-mail - delivery/read receipt Other:

COMPLAINANT'S SWORN STATEMENT: To the best of my knowledge and belief, these statements are true

Signature *Jacquelyn I Goforth* Title *N/A* Date *5/16/2024*
 Subscribed and sworn to or affirmed by me at *Palmer, Alaska* on *May 16, 2024*
 Signature *[Signature]* Title *notary public*
 Notary Public
 State of Alaska
 My Commission Expires *Mar 1, 2025*

APOC COMPLAINTS, RESPONSES, INVESTIGATION REPORTS & COMMISSION ACTIONS ARE PUBLIC DOCUMENTS

APOC ANCHORAGE	APOC JUNEAU	APOC COMPLAINT PROCESS: 2 AAC 50.450 - 476	
2221 E. NORTHERN LIGHTS #128	240 MAIN STREET #500	FILING COMPLAINTS: 2AAC 50.870	ANSWERING COMPLAINTS: 2AAC 50.880
ANCHORAGE, AK 99508	P.O. BOX 110222	APOC CRITERIA for ACCEPTING COMPLAINTS: 2 AAC 50.870	
907-276-4176 / FAX 907-276-7018	JUNEAU, AK 99811	INVESTIGATIONS & HEARINGS: 2 AAC 50.875-891	
TOLL-FREE 800-478-4176	465-4864 / FAX 465-4832	RULES for REQUESTING EXPEDITED CONSIDERATION: AS15.13.380(c)	
WEB: http://doa.alaska.gov/apoc/	APOC FORMS: http://doa.alaska.gov/apoc/forms_all.html	APOC LAWS: http://doa.alaska.gov/apoc/apoclaws.html	

APOC Complaint Summary

May 9, 2024

To Whom It May Concern;

On April 14, 2024, I filed for and received a non-profit business license under the name FRIENDS OF THE PALMER LIBRARY. The entity is #10266759. I am the President of the Corporation.
Exhibit 1

On April 15, 2024, I went to register in APOC and discovered that another entity had misrepresented themselves in 2023. My newly licensed name of FRIENDS OF THE PALMER LIBRARY was registered for a Special Interest Group Campaign concerning a Statewide Municipal election held in the City of Palmer in October 2023. The registration was entered into APOC on September 19, 2023 Exhibit 2. There was one amendment filed about this registration. It was filed on September 20, 2023 Exhibit 3.

There is no other record of this campaign. No required entries are in the APOC online system, no reports exist or can be generated. It appears almost all APOC Campaign Disclosure Laws have been violated.

An investigation has revealed the following:

1. The Deputy Treasurers and Co-Chairs on the APOC filing match a licensed entity with the business name of FRIENDS OF THE PALMER PUBLIC LIBRARY, INC. Their business license is Entity #21907D Attachment 4, 2 pages
 - a. The APOC registration listed Rachel House as Co-Chair. Rachel House is listed on Entity #21907D as President
 - b. APOC Co-Chair Susan Pougher is listed on Entity #21907D as Director, Secretary
 - c. APOC Deputy Treasure Jeanne Dirks is listed on Entity #21907D as Director, Treasurer
2. There are no further entries or reports available in the APOC system for all of 2023 Attachment 5.
3. There are no entries in APOC for 2024 Attachment 6.
4. A campaign did take place and was conducted.
 - a. The campaign was underway *PRIOR* to the APOC registration date of September 19, 2023. There was not one required form filled out and properly reported with APOC.
 - b. Evidence exists to prove the group licensed as FRIENDS OF THE PALMER PUBLIC LIBRARY, INC both collected funds and had expenditures for this ballot proposition campaign.

APOC Complaint Summary

1. On September 16, 2023 at 1:47 PM, Co-Chair person/President Rachel House posted on her social media page a picture of yard and window signs in the back of a vehicle with the caption: "City voters...do you want a sign to support the library bond initiative? I'd love to get these out of my car this weekend! Window and yard signs available!"
 - a. This post was THREE DAYS PRIOR to registering of this campaign on APOC ^{attachment 7}.
 - b. There is no sign any entry for this expenditure was ever entered into APOC. No reports can be generated.
2. Physical evidence exists in the form of a picture of campaign literature/advertisement posted on the social medial page for FRIENDS OF THE PALMER PUBLIC LIBRARY with the caption: "I'm out again talking to voters about Prop1..." ^{Exhibit 8a}
3. A close-up of the "VOTE YES ON PROP 1" literature reveals the following:
 - a. The name of the campaign (FRIENDS OF THE PALMER LIBRARY)
 - b. The campaign chair (Rachel House)
 - c. The top three donors (Sylvia Reeder, Ronpaugh family, Joseph Offner) can be read albeit backwards, through the piece. ^(Exhibit 8).
 - d. There are no required entries for expenditures or donations listed in APOC. No reports can be generated.

Due to the above violations, I, as a new business owner, am precluded from my right to file in APOC under my new nonprofit name until this matter is resolved.

No one from our corporation, myself or the directors, had anything to do with the above fraud.

Jacquelyn I Goforth

Alaska Entity #10266759

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Incorporation

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, hereby certifies that a duly signed and verified filing pursuant to the provisions of Alaska Statutes has been received in this office and has been found to conform to law.

ACCORDINGLY, the undersigned, as Commissioner of Commerce, Community, and Economic Development, and by virtue of the authority vested in me by law, hereby issues this certificate to

Friends of the Palmer Library



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **April 14, 2024**.

A handwritten signature in black ink, appearing to read "Julie Sande".

Julie Sande
Commissioner

Print

View Amendment

Print

GROUP REGISTRATION FORM

AMENDED

COMPLETED

Submission Date: **09/19/2023**
 Filer First Name: **Susan**
 Filer Middle Name (Optional): **M**
 Filer Last Name: **Pougher**
 Filer's Title with group: **Vice Chairperson**

GROUP INFORMATION

Previously Registered: **No**
 Election Year: **2023**
 Group Name: **The Friends of the Palmer Library**
 Abbreviation:
 Purpose: **To support the activities of the Palmer Library. We sponsor Summer Reading programs, provide for Book Purchases and organize Library community activities.**
 Group Type: **Special Interest**
 Group Mailing Address: **137 E Arctic Ave**
 City, State Zip: **Palmer, Alaska 99645**
 Additional Email Addresses to Notify: **Rachel.house@gmail.com,dirks@mtaonline.net,susanpougher@gmail.com**

CHAIR

Name: **Rachel House**
 Address: **431 Rempel Ave**
 City, State Zip: **Palmer, Alaska 99645**
 Phone: **907 841-7783**
 E-mail: **rachel.house@gmail.com**
 Fax (Optional): **Did Not Report**

TREASURER

Name: **Jeanette Dirks**
 Address: **P O Box 4129**
 City, State Zip: **Palmer, Alaska 99645**
 Phone: **907 244-7321**
 E-mail: **dirks@mtaonline.net**
 Fax (Optional): **Did Not Report**

DEPUTY TREASURERS / CO-CHAIRS

Name	Address	Title
Susan Pougher	PO BOX 876440 Wasilla, Alaska 99687	Co-Chair
Rachel House	431 Rempel Ave Palmer, Alaska 99645	Co-Chair
Jeanette Dirks	P O Box 4129 Palmer, Alaska 99645	Deputy Treasurer

TYPE OF GROUP

SPECIAL INTEREST GROUP

CAMPAIGN PLANS

Election Type	Election	Municipality
Statewide Municipal	2023 - Palmer, City of	Palmer, City of



BANK ACCOUNT / CAMPAIGN DEPOSITORY

Exempt From Entering

I certify that this group expects to be exempt from entering its bank information. If these conditions change, an amendment must be filed with the required information.

Print

View Amendment

Print

Print

View Previous

Print

GROUP REGISTRATION FORM

AMENDMENT

Amendment Description: Group registration mistakenly filed. Entity registration will be filed.

COMPLETED

Submission Date: 09/20/2023
 Filer First Name: Susan
 Filer Middle Name (Optional): m
 Filer Last Name: Pougher
 Filer's Title with Group: Vice Chairperson

GROUP INFORMATION

Previously Registered: Yes
 Election Year: 2023
 Group Name: The Friends of the Palmer Library
 Abbreviation:
 Purpose: To support the activities of the Palmer Library. We sponsor Summer Reading programs, provide for Book Purchases and organize Library community activities.
 Group Type: Special Interest
 Group Mailing Address: 137 E Arctic Ave
 City, State Zip: Palmer, Alaska 99645
 Additional Email Addresses to Notify: Rachel.house@gmail.com,dirks@mtaonline.net,susanpougher@gmail.com

CHAIR

Name: Rachel House
 Address: 431 Rempel Ave
 City, State Zip: Palmer, Alaska 99645
 Phone: 907 841-7783
 E-mail: rachel.house@gmail.com
 Fax (Optional): Did Not Report

TREASURER

Name: Jeanette Dirks
 Address: P O Box 4129
 City, State Zip: Palmer, Alaska 99645
 Phone: 907 244-7321
 E-mail: dirks@mtaonline.net
 Fax (Optional): Did Not Report

DEPUTY TREASURERS / CO-CHAIRS

Name	Address	Title
Susan Pougher	PO BOX 876440 Wasilla, Alaska 99687	Co-Chair
Rachel House	431 Rempel Ave Palmer, Alaska 99645	Co-Chair
Jeanette Dirks	P O Box 4129 Palmer, Alaska 99645	Deputy Treasurer

TYPE OF GROUP

SPECIAL INTEREST GROUP

CAMPAIGN PLANS

No Campaign in 2023: Collect and expend funds to pay debts or administrative expenses for a 2024 campaign. 

BANK ACCOUNT / CAMPAIGN DEPOSITORY

Exempt From Entering

I certify that this group expects to be exempt from entering its bank information. If these conditions change, an amendment must be filed with the required information.

Print

View Previous

Print



Department of Commerce, Community, and Economic Development
**CORPORATIONS, BUSINESS & PROFESSIONAL
LICENSING**

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	FRIENDS OF THE PALMER PUBLIC LIBRARY, INC.

Entity Type: Nonprofit Corporation

Entity #: 21907D

Status: Good Standing

AK Formed Date: 5/19/1980

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2024 [File Biennial Report](#)

Entity Mailing Address: 655 S VALLEY WAY, PALMER, AK 99645

Entity Physical Address: 655 S VALLEY WAY, PALMER, AK 99645

Registered Agent

Agent Name: Laura Brekke

Registered Mailing Address: 655 S VALLEY WAY, PALMER, AK 99645

Registered Physical Address: 655 S VALLEY WAY, PALMER, AK 99645

Officials

Show Former

AK Entity #	Name	Titles	Owned
	JANICE STORMER	Assistant Secretary	
	JEANNE DIRKS	Director, Treasurer	
	LORETTA HUSKA	Director, Vice President	

State of Alaska myAlaska My Government Resident Business in Alaska Visiting Alaska State Employees

APOC Online Reports

HOME POFD/LFD **CAMPAIGN DISCLOSURE** LOBBYING INDEPENDENT EXPENDITURES COMMISSION ACTIONS

State of Alaska > Department of Administration > APOC > Online Reports > Campaign > Group Registration

GROUP REGISTRATION: FORMS

Report Year: Status: Filed After: Filed Before: Any Name Group Type

Report Year	Name	Type	Treasurer Name	Submitted	Status
2023	The Friends of the Palmer Library	Special Interest	Jeanette Dirks	09/19/2023	Filed *
2023	The Friends of the Palmer Library	Special Interest	Jeanette Dirks	09/20/2023	Filed **

Note: There are additional features and columns available by right-clicking the column headers. You may add and remove columns under the 'Additional Fields' submenu.

* Items with a black asterisk (*) have been Amended and may not represent the most current or accurate information.
 ** Items with two red asterisks (**) are Amendments.
 *** Items with three blue asterisks (***) have been filed by Apoc Staff members.

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2023

No campaign report forms filed on APOC



https://aws.stat



State of Alaska myAlaska My Government Resident Business in Alaska Visiting Alaska State Employees

APOC Online Reports

HOME POFD/LFD **CAMPAIGN DISCLOSURE** LOBBYING INDEPENDENT EXPENDITURES COMMISSION ACTIONS

State of Alaska > Department of Administration > APOC > Online Reports > Campaign > Group Registration

GROUP REGISTRATION: FORMS

Report Year: 2024 Status: All Complete Forms Filed After: Filed Before: Group Name: Friends of the Palmer L Group Type: Any

Search Export Clear

Report Year	Name	Type	Treasurer Name	Submitted	Status
Your Search Returned No Results.					

Note: There are additional features and columns available by right-clicking the column headers. You may add and remove columns under the 'Additional Fields' submenu.

- * Items with a black asterisk (*) have been Amended and may not represent the most current or accurate information.
- ** Items with two red asterisks (**) are Amendments.
- *** Items with three blue asterisks (***) have been filed by Apoc Staff members.

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2024
No reports/forms found

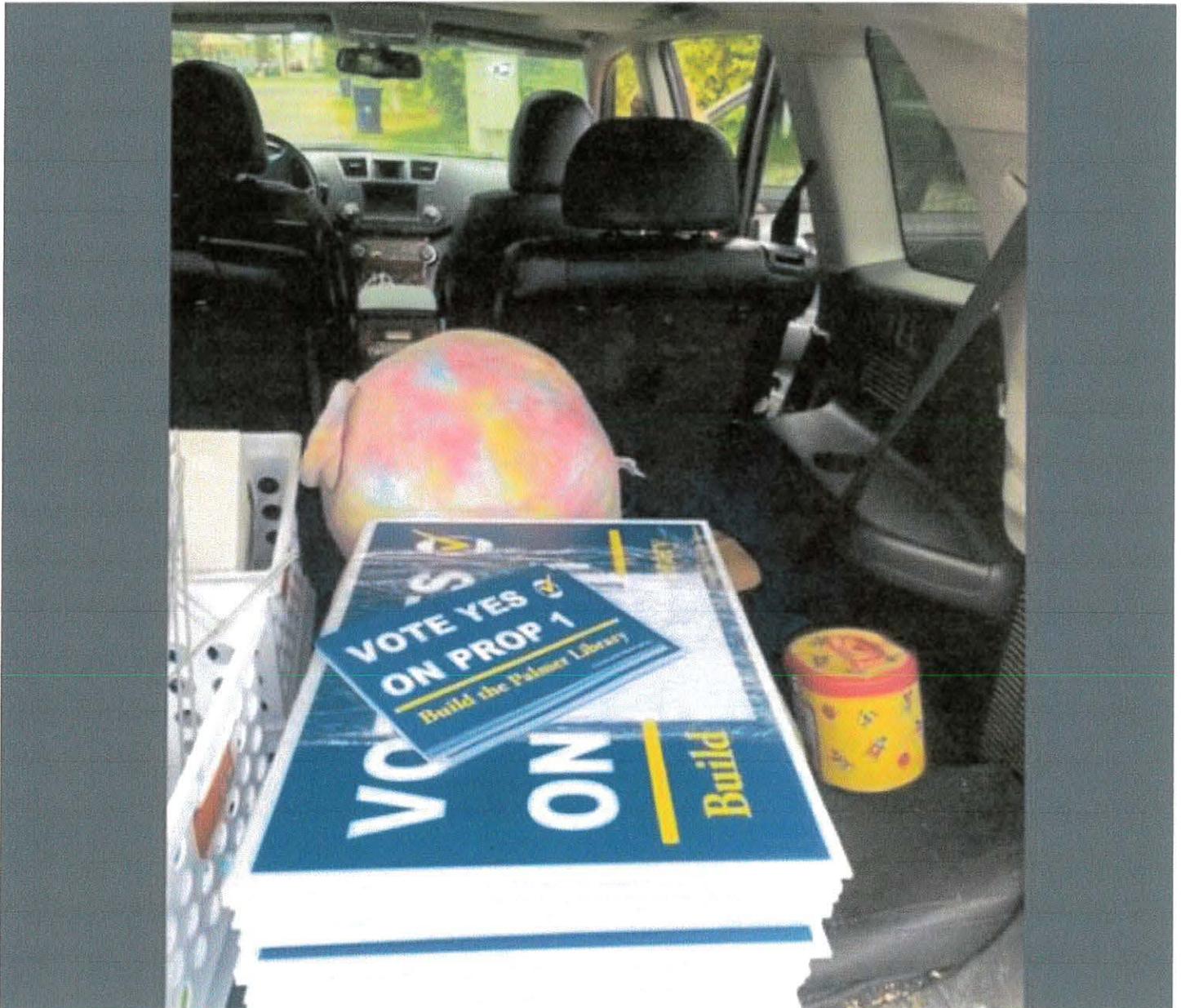


Rachel House

September 16 at 1:47 PM

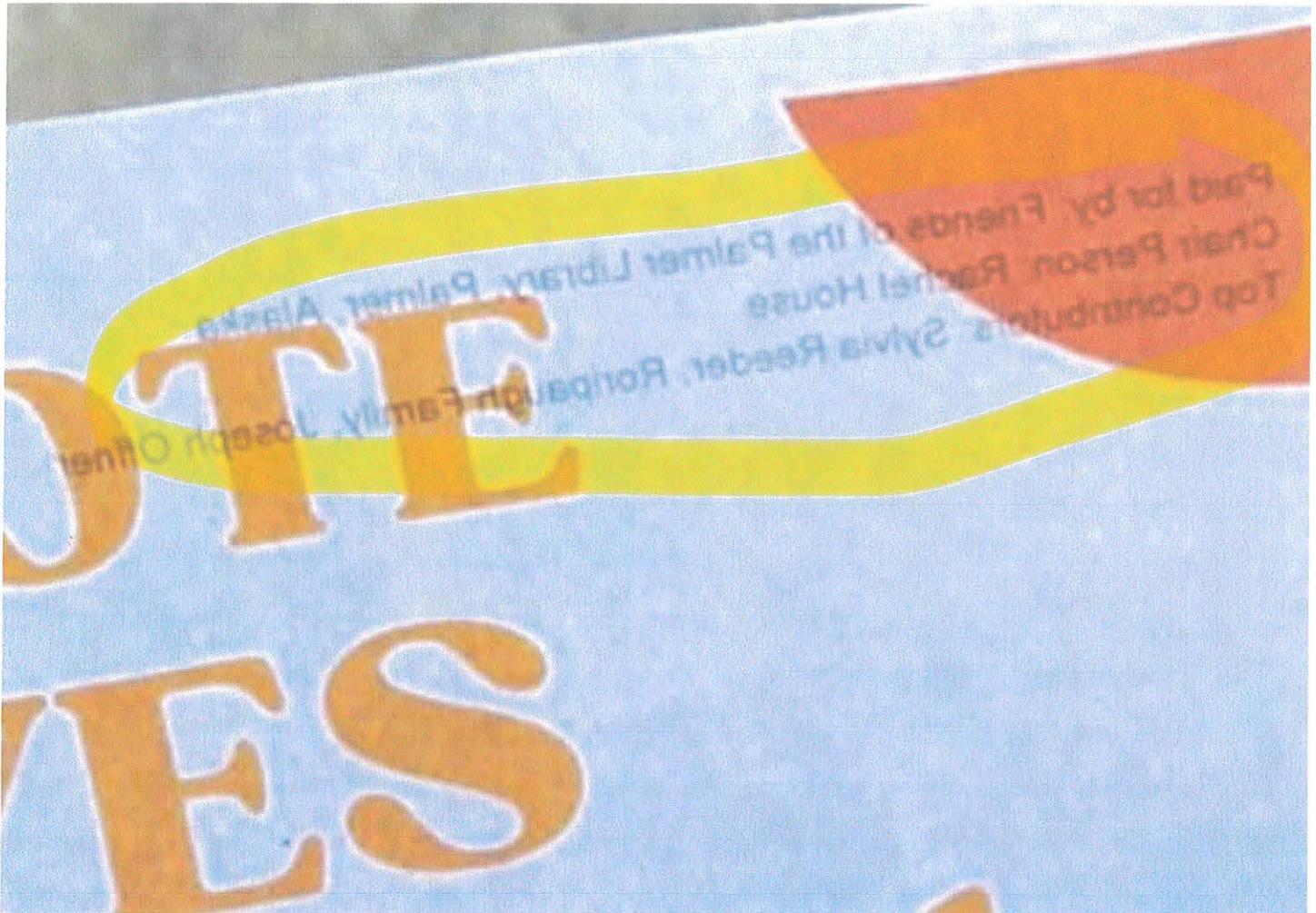


City voters...do you want a sign to support the library bond initiative? If love to get these out of my car this weekend! Window and yard signs available!



PROOF OF CAMPAIGN EXPENDITURE

Advertisement on social media on September 16th, 2023,
(THREE days prior to campaign registration with APOC)



PROOF OF CAMPAIGN FUNDS RAISED AND EXPENDITURE ADVERTISING

(Printed on back of advertising 😊)

Paid for by: Friends of the Palmer Library, Palmer AK 99645

Chair Person: Rachel House

Top Contributors: Sylvia Reeder, Ronpaugh family, Joseph Offner



Friends of the Palmer Public Library, Inc. ...

Sep 26, 2023 · 🌐

I'm out again talking to voters about Prop 1 and a little boy gave me a book for our library! Palmer is full of kindhearted children ❤️ 📖 ❤️ They really love their library too!



Important Information:

- 1. This form is used to report a change of an entity's address.
- 2. The form is available on the Internet at www.dor.gov.
- 3. All information provided on this form must be true and correct.
- 4. All information provided on this form must be true and correct.
- 5. All information provided on this form must be true and correct.

Information is required by law to be provided to the public. Information is required to be provided to the public. Information is required to be provided to the public.

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Payment of Fees	
Fee:	<input checked="" type="checkbox"/> Entity Address Change Fee There is no fee associated with this filing.

Entity Information	
Entity Name:	Friends of the Palmer Public Library, Inc.
Entity ID Number:	219070

Entity Physical Address Change	
Previous Physical Address:	US5 S VALLEY WAY, PALMER, AK 99645
New Physical Address:	137 E. Arctic Ave, Palmer, AK 99645

PART II Required Statement

The current/previous Registered Agent and addresses are on record with this Division and are publicly available online in the entity's corporate record at www.Corporations.Alaska.gov, dkl Search Corporations Database.

RECEIVED
JUNEAD

PART IV Continuing or New Registered Agent Information to be Updated APR 23 2024

Registered Agent Name: (Required)	PRUDENCE P M ^{RS} KENNEY			COPL
Registered Agent Physical Address (Required):	2630 N. BARCLAY REJOFF DR. WASILLA	Alaska	99654	
Registered Agent Mailing Address (Required):	450 S. COLONY WAY STE 3 PALMIR	Alaska	99645	

PART V Signature

Verify your entity's type, required signature/title, and essential report by going to www.Corporations.Alaska.gov, dkl Search Corporations Database. This form will not be filed if the entity's biennial report is not current.

Corporations - Nonprofit, Business, Professional, Cooperative: The form must be signed by a President or Vice President on record. The registered agent change was authorized by a resolution duly adopted by the Board of Directors of the corporation.

Limited Liability Company: The form must be signed by a Member or Manager on record, or an attorney-in-fact. The registered agent change was authorized by the company's manager, or, if the company is not managed by a manager, by the members. If the Member or Manager is an entity, signing authority on behalf of the entity must be provided.

Limited Liability Partnership: The form must be signed by a Partner or attorney-in-fact. The registered agent change was authorized by the limited liability partnership.

Limited Partnership: The form must be signed by a General Partner or attorney-in-fact. The registered agent change was authorized by a resolution duly adopted by all of the general partners. If the General Partner is an entity, signing authority on behalf of the entity must be provided.

Cooperative Electric & Telephone: The form must be signed by a presiding officer of the board. A director is not an authorized signer. The registered agent change was authorized by a resolution duly adopted by the board of directors of the corporation.

Persons who sign documents filed with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor.

Printed Name:	Rachel House	Title of Authorized Signer:	President
Signature:	<i>R House</i>	Date Signed:	4/17/2024

Change of Registered Agent (Statement of Change)

All Entity Types (Except Religious Corporation)

- If you are filing for a Religious Corporation (that is different from a Merger/ Acquisition Corporation), then you must file a Change of Registered Agent (Statement of Change) form (SOS 543) for a Religious Corporation. Verify your entity type at www.Corporations.Alaska.gov, click Search Corporations Database.
- Standard processing time for complete and correct filings submitted to this office is approximately 10-15 business days. All filings are reviewed in the date order they are received.
- The information you submit is a public record and will be posted on the State's website.
- Mail this form and the non-refundable \$25 filing fee in U.S. dollars to the letterhead address. Make the check or money order payable to the State of Alaska or use the attached credit card payment form.

Important: For Alaska Statute, all entities that (must) continuously (with no interruption) maintain in this state (Alaska) a registered agent AND a registered office (with a in Alaska physical location and an Alaska mailing address) for the purpose of a registered agent's statutory requirements to receive service of process, notices, or demands required or permitted by law to be served upon the corporation.

Failure to meet registered agent requirements could result in involuntary dissolution of the entity's authority to conduct business in the State of Alaska.

For more registered agent information, go to www.Corporations.Alaska.gov, click Registered Agents FAQ.

PART I Payment of Fees		
Required Fees:	<input checked="" type="checkbox"/> Non-Refundable Filing Fee	\$25.00

PART II Entity information on Record with the State	
Entity Name:	Friends of the Palmer Public Library, Inc.
Alaska Entity Number:	219070



Entity Mailing Address Change

Previous Mailing Address:	US 5 Valley Way Palmer AK 99646
New Mailing Address:	137 E Arctic Ave. Palmer AK 99645

Registered Agent

I understand that this form will only update this entity's business address on record and will not change the registered Registered Agent or their address. If the Registered Agent and/or their address need to be updated, I will submit a separate Statement of Change form with the required \$25 filing fee.

Signature

By my signature below, I declare under the penalty of perjury that the information provided on this application is true and correct to the best of my knowledge.

I further certify that by submitting this form I am an authorized official or agent for this entity, or contractually authorized by the officials or agents, to act on behalf of this entity regarding this matter.

Signature:		Date:	4-19-2011
Title:	Susan Foughe	Position:	Director

Number of 2011 and 2012 members of ARTICLE.

REGISTRATION INFORMATION: This form is required for all entities that are required to file with the State of Alaska. The fee for filing this form is \$25.00. The fee for filing this form is \$25.00. The fee for filing this form is \$25.00.

STATE OF ALASKA DEPARTMENT OF REVENUE

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 type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Kristen Erdman</u> C. Date of Delivery <u>6.18.24</u></p>												
<p>1. Article Addressed to:</p> <p><u>PRUDENCE MCKENNEY</u> <u>PRES, FPPL</u> <u>137 E. ARCTIC AVE</u> <u>PALMER AK 99645</u></p>  <p>9590 9402 8844 4005 5933 90</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>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input checked="" type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input checked="" type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<input type="checkbox"/> Collect on Delivery Restricted Delivery													
<p>2. Article Number (Transfer from service label)</p> <p><u>7007 3020 0002 6337 7915</u></p>	<p><input type="checkbox"/> Restricted Delivery</p>												
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>													

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)																			
For delivery information visit our website at www.usps.com																			
Palmer AK 99645 OFFICIAL USE																			
<table border="0"> <tr> <td>Postage</td> <td>\$</td> <td><u>3.45</u></td> </tr> <tr> <td>Certified Fee</td> <td></td> <td><u>0.00</u></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> <td><u>11.65</u></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> <td><u>0.00</u></td> </tr> <tr> <td></td> <td></td> <td><u>2.11</u></td> </tr> <tr> <td>Total Postage & Fees</td> <td>\$</td> <td><u>17.41</u></td> </tr> </table>	Postage	\$	<u>3.45</u>	Certified Fee		<u>0.00</u>	Return Receipt Fee (Endorsement Required)		<u>11.65</u>	Restricted Delivery Fee (Endorsement Required)		<u>0.00</u>			<u>2.11</u>	Total Postage & Fees	\$	<u>17.41</u>	
Postage	\$	<u>3.45</u>																	
Certified Fee		<u>0.00</u>																	
Return Receipt Fee (Endorsement Required)		<u>11.65</u>																	
Restricted Delivery Fee (Endorsement Required)		<u>0.00</u>																	
		<u>2.11</u>																	
Total Postage & Fees	\$	<u>17.41</u>																	
<p>Sent to <u>PRUDENCE MCKENNEY</u></p> <p>Street, Apt. No. or PO Box No. <u>37 ARCTIC AVE</u></p> <p>City, State, ZIP+4 <u>PALMER AK 99645</u></p>																			
<p>PS Form 3800, August 2006 See Reverse for Instructions</p>																			

7007 3020 0002 6337 7915

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

9589 0710 5270 0404 8681 28

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

Palmer AK 99645

Certified Mail Fee	\$ 43.65	0646 B
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$ 11.65	
<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	
Total Postage and Fees	\$ 15.98	

Sent to: *Prudence McKenney Pres. FPPL*
 Street and Apt. No., or PO Box No.: *137 E. ARCTIC AVE*
 City, State, ZIP+4®: *PALMER AK 99645*

Postmark: *MAY 15 2024*
 05/06/2024

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

USPS TRACKING#



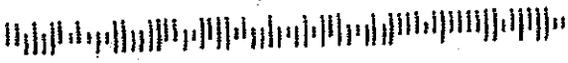
9590 9402 8844 4005 5855 79

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

United States
 Postal Service

• Sender. Please print your name, address, and ZIP+4® in this box•

JACKIE GEFOROT
PO BOX 2768
PALMER AK 99645



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:

Prudence McKenney
PRS. FPPL
137 E. ARCTIC AVE
PALMER AK 99645



9590 9402 8844 4005 5855 79

2. Article Number (Transfer from service label)

9589 0710 5270 0404 8681 28

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Prudence McKenney Agent Addressee

B. Received by (Printed Name) *Prudence McKenney*

C. Date of Delivery

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

3. Service Type
- | | |
|--|--|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input checked="" type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input checked="" type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |