



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

Florida Statute 166.0415
Effective July 01, 2021

Code Enforcement Complaint Form

Date of complaint: 4/4/25 Name (required) Don White
Phone: 3867524344 Address: 205 N Marion Avenue Email: whited@lcfla.com
Do you wish to be contacted about this complaint? Yes No Best Time To Call: _____
Address of Complaint: 372 NW Gwen Lake Avenue Nature
of Complaint: Unsafe structure / Overgrowth / Vacant land and structures violation

How long has the complaint been going on? UNKNOWN Do you know who the person(s) involved are? Yes No If yes, who? _____ Do you know the time frames that the complaint is happening? Yes No If yes, when? Currently Is there any other information that you would like to us to know?

***** Below Internal Use Only *****

Date Received: 4/4/25 Via: Person Case Number Assigned 202500000089
Notes:

Case Data Sheet for case # 25-00000089

Parcel# 06058-000

Address: 372 NW Gwen Lake Avenue

Owner: James H Johnston III

Date of first inspection: 4/4/25

1st Notice of Violation sent: 4/7/25

2nd inspection date: _____

2nd Notice of Violation sent: _____

Date of Public Notice placed on property: _____

Notice of Mag. Hearing sent: _____

Notice on City of Lake City website on: _____

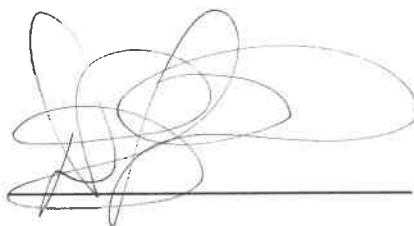
Notice posted in City Hall:

Mailing Cost/Date: \$9.64 / 4/7/25

Mailing Cost/Date: _____

Mailing Cost/Date: _____

Total Mailing Cost: _____



Don White CEO/ City of Lake City

COLUMBIA COUNTY

Property Appraiser

Parcel 31-3S-17-06058-000

Owners

JOHNSTON JAMES H III
419 SW LAKEVIEW AVE
LAKE CITY, FL 32025

Parcel Summary

Location	372 NW GWEN LAKE AVE
Use Code	0100: SINGLE FAMILY
Tax District	1: CITY OF LAKE CITY
Acreage	.7960
Section	31
Township	3S
Range	17
Subdivision	DIST 2

Legal Description

COMM INTERS OF S R/W OF DUVAL ST EXTENDED & C/L OF GWEN LAKE BLVD, RUN W'LY ALONG PERPENDICULAR OF GWEN LAKE BLVD 50 FT TO W R/W OF SAID BLVD, RUN S'LY ALONG A CURVE 44.10 FT FOR POB, CONT S'LY ALONG CURVE 95.38 FT, S 120 FT, W 220 FT, N 213 FT, NE 220 FT TO POB.
(IN NW1/4).LIFE EST 1067-2365
WD 1243-264



Working Values

	2025
Total Building	\$17,894
Total Extra Features	\$1,200

2025	
Total Market Land	\$13,190
Total Ag Land	\$0
Total Market	\$32,284
Total Assessed	\$32,284
Total Exempt	\$0
Total Taxable	\$32,284
SOH Diff	\$0

Value History

	2024	2023	2022	2021	2020	2019
Total Building	\$17,397	\$15,904	\$13,754	\$11,600	\$10,603	\$9,775
Total Extra Features	\$1,200	\$1,200	\$1,200	\$1,200	\$1,200	\$1,200
Total Market Land	\$13,190	\$13,190	\$13,190	\$10,413	\$10,413	\$10,413
Total Ag Land	\$0	\$0	\$0	\$0	\$0	\$0
Total Market	\$31,787	\$30,294	\$28,144	\$23,213	\$22,216	\$21,388
Total Assessed	\$30,896	\$28,087	\$25,534	\$23,213	\$22,216	\$21,388
Total Exempt	\$0	\$0	\$0	\$0	\$0	\$0
Total Taxable	\$30,896	\$28,087	\$25,534	\$23,213	\$22,216	\$21,388
SOH Diff	\$891	\$2,207	\$2,610	\$0	\$0	\$0

Document/Transfer/Sales History

Instrument / Official Record	Date	Q/U	Reason	Type	V/I	Sale Price	Ownership
WD 1243/0264	2012-10-15	Q	01	WARRANTY DEED	Improved	\$25,000	Grantor: RAYMA M & JAMES LEO MARKHAM & JENNIFER BOWLES Grantee: JAMES H JOHNSTON III

Buildings

Building # 1, Section # 1, 10603, SFR

Type	Model	Heated Sq Ft	Repl Cost New	YrBlt	WAY	Other % Dpr	Normal % Dpr	% Cond	Value
0100	01	1990	\$89,469	1945	1945	60.00%	80.00%	20.00%	\$17,894

SPECIAL MAGISTRATE
City of Lake City
205 N Marion Ave.
Lake City, Florida 32055

NOTICE OF HEARING

Case # 2500000089 _____

Respondent
____ James H Johnst
on III _____

NOTICE OF HEARING: You are hereby notified and commanded to appear before the Code Enforcement Board of Lake City, Florida on (day) Thursday the 2 day of October 2025, at (time) 5:30 p.m. . The hearing will take place at City Hall, 205 N Marion Ave., 2nd floor, Council Chambers, Lake City, Florida, at which time evidence and testimony will be presented to said Board concerning the violation. You have the right to examine all evidence and to cross-examine all witnesses, and to present evidence and testimony on your behalf concerning said violation.

Your failure to appear at the hearing may result in a civil fine being imposed on you for said violation up to \$250.00 per day/per violation each day the violation continues.

****It is the RESPONSIBILITY of the RESPONDENT to schedule a Compliancy inspection****

This case will not go before the Special Magistrate if the violation (s) are brought into compliance in accordance with the Notice of Violation.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name James H Johnston III Relationship Owner

On date 7/3/25 time being 4:30 Personal Service

Posted on property and at City Hall Certified Mail, Return Receipt requested

First class mailing

Refused to sign, drop service

Don White

Print Name of Code Inspector


Signature of Code Inspector

I acknowledge receipt of a copy of this Notice of Hearing

Signature of Respondent/Recipient Date



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

NOTICE OF VIOLATION
CODE ENFORCEMENT – SPECIAL MAGISTRATE
CASE # 24-00000089 – 2ND Notice

In the name of Lake City, Florida, the undersigned Code Inspector certifies that he/she has reasonable grounds to believe and does believe that on/prior to the date below, the following violation(s) of the Codes of Lake City were violated at the property located at:

Name: James H Johnston III

Address: 372 NW Gwen Lake Avenue

INITIAL INSPECTION PROMPTED BY:

Date: 4/7/25 Complaint CE Personnel Observation
Complainant: Don White CE Personnel: Don White

Violation Code

Violation Description

301.3 Vacant structures and land.	Vacant structures and <i>premises</i> thereof or vacant land shall be maintained in a clean, safe, secure and sanitary condition as provided herein so as not to cause a blighting problem or adversely affect the public health or safety.
302.4 Weeds.	<i>Premises</i> and <i>exterior property</i> shall be maintained free from weeds or plant growth in excess of 12 INCHES . Noxious weeds shall be prohibited. Weeds shall be defined as all grasses, annual plants and vegetation, other than trees or shrubs provided; however, this term shall not include cultivated flowers and gardens.
304.1.1 Unsafe conditions	The following conditions shall be determined as unsafe and shall be repaired or replaced to comply with the <i>International Building Code</i> or the <i>International Existing Building Code</i> as required for existing buildings: 3. Structures or components thereof that have reached their limit state.



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Violation Code	Corrective Action
301.3 Vacant structures and land.	Structure must be repaired / properly secured and maintained to remove blight condition. Permits must be secured for repairs to structure by correction date 5-7-25. Repairs to be started within permit start and expiration dates.
302.4 Weeds.	All grass and overgrown vegetation on property must be cut within ordinance limits and maintained to remove and prevent future blight condition.
304.1.1 Unsafe conditions	Unsafe conditions of property structure must be repaired or demolished and maintained to a safe and sound dwelling. Secured to prevent blight and unauthorized access/ usage.

WARNING: This notice constitutes a warning to discontinue the above violation, and to bring the violation into compliance on or before the date listed below:

Due date: _____ 9/30/25 _____



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
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Warning

If the owner of property which is subject to an enforcement proceeding before the enforcement board, or court transfers ownership of such property between the time the initial pleading was served and the time of the hearing, such owner shall:

- (1) Disclose in writing the existence and the nature of the proceedings to the prospective transferee;
- (2) Deliver to the prospective transferee a copy of the pleadings, notices, and other materials relating to the code enforcement proceedings received by the transferor;
- (3) Disclose, in writing, to the prospective transferee that the new owner will be responsible for compliance with the applicable code and with orders issued in the code enforcement proceedings;
- (4) File a notice with the code enforcement official of the transfer of the property, with the identity and address of the new owner and copies of the disclosures made to the new owner within five days after the date of the transfer.

A failure to make the disclosures described in paragraphs (1), (2) and (3) above before the transfer creates a rebuttal presumption of fraud. If the property is transferred before the hearing, the proceeding shall not be dismissed, but the new owner shall be provided a reasonable period to correct the violation before the hearing is heard.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name: James H Johnston III Relationship owner: Owner

On date: 7/3/25 time being: 3:50 P.M.

Personal Service

Posted on property and at City Hall

Certified Mail, Return Receipt requested X

Refused to sign , drop service

 Don White

Print Name of Code Inspector

First class mailing

Signature of Code Inspector

SPECIAL MAGISTRATE
City of Lake City
205 N Marion Ave.
Lake City, Florida 32055

NOTICE OF HEARING

Case # 2500000089 _____

Respondent
____ James H Johnson III _____

NOTICE OF HEARING: You are hereby notified and commanded to appear before the Code Enforcement Board of Lake City, Florida on (day) Thursday the 4 day of September, 2025, at (time) 5:30 p.m. . The hearing will take place at City Hall, 205 N Marion Ave., 2nd floor, Council Chambers, Lake City, Florida, at which time evidence and testimony will be presented to said Board concerning the violation. You have the right to examine all evidence and to cross-examine all witnesses, and to present evidence and testimony on your behalf concerning said violation.

Your failure to appear at the hearing may result in a civil fine being imposed on you for said violation up to \$250.00 per day/per violation each day the violation continues.

****It is the RESPONSIBILITY of the RESPONDENT to schedule a Compliancy inspection****

This case will not go before the Special Magistrate if the violation (s) are brought into compliance in accordance with the Notice of Violation.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name Jimmy H Johnson III _____ Relationship
Owner

On date 7/3/25 time being 4:30 Personal Service
Posted on property and at City Hall Certified Mail, Return Receipt requested
First class mailing
Refused to sign, drop service

Don White
Print Name of Code Inspector

Signature of Code Inspector

I acknowledge receipt of a copy of this Notice of Hearing

Signature of Respondent/Recipient Date

SPECIAL MAGISTRATE

City of Lake City
205 N Marion Ave.
Lake City, Florida 32055

NOTICE OF HEARING

Case # 2500000089 _____

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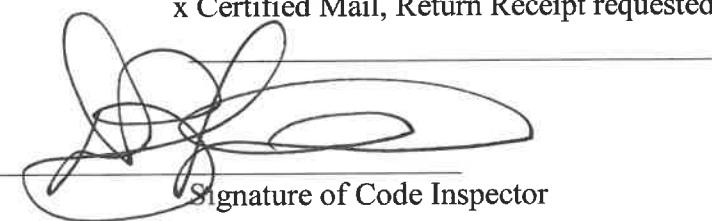
This case will not go before the Special Magistrate if the violation (s) are brought into compliance in accordance with the Notice of Violation.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name Jimmy H Johnson III _____ Relationship
Owner _____

On date 7/3/25 time being 4:30 Personal Service
Posted on property and at City Hall Certified Mail, Return Receipt requested
First class mailing
Refused to sign, drop service

Don White
Print Name of Code Inspector



Signature of Code Inspector

I acknowledge receipt of a copy of this Notice of Hearing

Signature of Respondent/Recipient Date



DEPARTMENT OF GROWTH MANAGEMENT

205 North Marion Avenue

Lake City, Florida 32055

Telephone: (386) 719-5750

growthmanagement@lcfla.com

NOTICE OF VIOLATION
CODE ENFORCEMENT – SPECIAL MAGISTRATE
CASE # 24-00000089 – 2ND Notice

In the name of Lake City, Florida, the undersigned Code Inspector certifies that he/she has reasonable grounds to believe and does believe that on/prior to the date below, the following violation(s) of the Codes of Lake City were violated at the property located at:

Name: James H Johnson III

Address: : 372 NW Gwen Lake Avenue

INITIAL INSPECTION PROMPTED BY:

INITIAL INSPECTION

Complaint X CE Personnel Observation X

Date: 4/7/25

Complainant: Don White CE Personnel: Don White

Violation Code

Violation Description

301.3 Vacant structures and land.	Vacant structures and <i>premises</i> thereof or vacant land shall be maintained in a clean, safe, secure and sanitary condition as provided herein so as not to cause a blighting problem or adversely affect the public health or safety.
302.4 Weeds.	<i>Premises and exterior property</i> shall be maintained free from weeds or plant growth in excess of 12 INCHES . Noxious weeds shall be prohibited. Weeds shall be defined as all grasses, annual plants and vegetation, other than trees or shrubs provided; however, this term shall not include cultivated flowers and gardens.
304.1.1 Unsafe conditions	The following conditions shall be determined as unsafe and shall be repaired or replaced to comply with the <i>International Building Code</i> or the <i>International Existing Building Code</i> as required for existing buildings: 3. Structures or components thereof that have reached their limit state.



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205 North Marion Avenue

Lake City, Florida 32055

Telephone: (386) 719-5750

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Violation Code	Corrective Action
301.3 Vacant structures and land.	Structure must be repaired / properly secured and maintained to remove blight condition. Permits must be secured for repairs to structure by correction date 5-7-25. Repairs to be started within permit start and expiration dates.
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WARNING: This notice constitutes a warning to discontinue the above violation, and to bring the violation into compliance on or before the date listed below:

Due date: _____ 7/31/25 _____



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
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Warning

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- (1) Disclose in writing the existence and the nature of the proceedings to the prospective transferee;
- (2) Deliver to the prospective transferee a copy of the pleadings, notices, and other materials relating to the code enforcement proceedings received by the transferor;
- (3) Disclose, in writing, to the prospective transferee that the new owner will be responsible for compliance with the applicable code and with orders issued in the code enforcement proceedings;
- (4) File a notice with the code enforcement official of the transfer of the property, with the identity and address of the new owner and copies of the disclosures made to the new owner within five days after the date of the transfer.

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I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name: James H Johnson III Relationship owner: Owner

On date: 7/3/25 time being: 3:50 P.M.

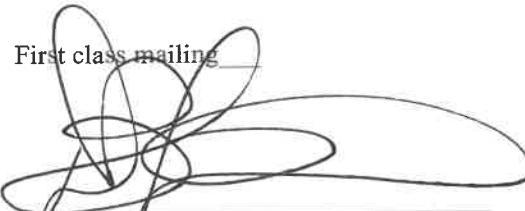
Personal Service

Posted on property and at City Hall

Certified Mail, Return Receipt requested X

Refused to sign , drop service

 Don White
Print Name of Code Inspector

First class mailing


Signature of Code Inspector



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

NOTICE OF VIOLATION
CODE ENFORCEMENT – SPECIAL MAGISTRATE
CASE # 25-00000089

In the name of Lake City, Florida, the undersigned Code Inspector certifies that he/she has reasonable grounds to believe and does believe that on/prior to the date below, the following violation(s) of the Codes of Lake City were violated at the property located at:

Name: James H Johnson III

Address: 372 NW Gwen Lake Avenue

INITIAL INSPECTION PROMPTED BY:

INITIAL INSPECTION

Date: 4 /7/25

Complaint X CE Personnel Observation X
Complainant: Don White CE Personnel: Don White

Violation Code

Violation Description

301.3 Vacant structures and land.	Vacant structures and <i>premises</i> thereof or vacant land shall be maintained in a clean, safe, secure and sanitary condition as provided herein so as not to cause a blighting problem or adversely affect the public health or safety.
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205 North Marion Avenue
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Violation Code	Corrective Action
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WARNING: This notice constitutes a warning to discontinue the above violation, and to bring the violation into compliance on or before the date listed below:

Due date: 5/7/25



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

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I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name: James H Johnston III Relationship owner: Owner

On date: 5/7/25 time being: _____

Personal Service _____

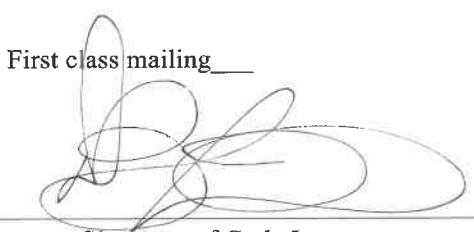
Posted on property and at City Hall

Certified Mail, Return Receipt requested X

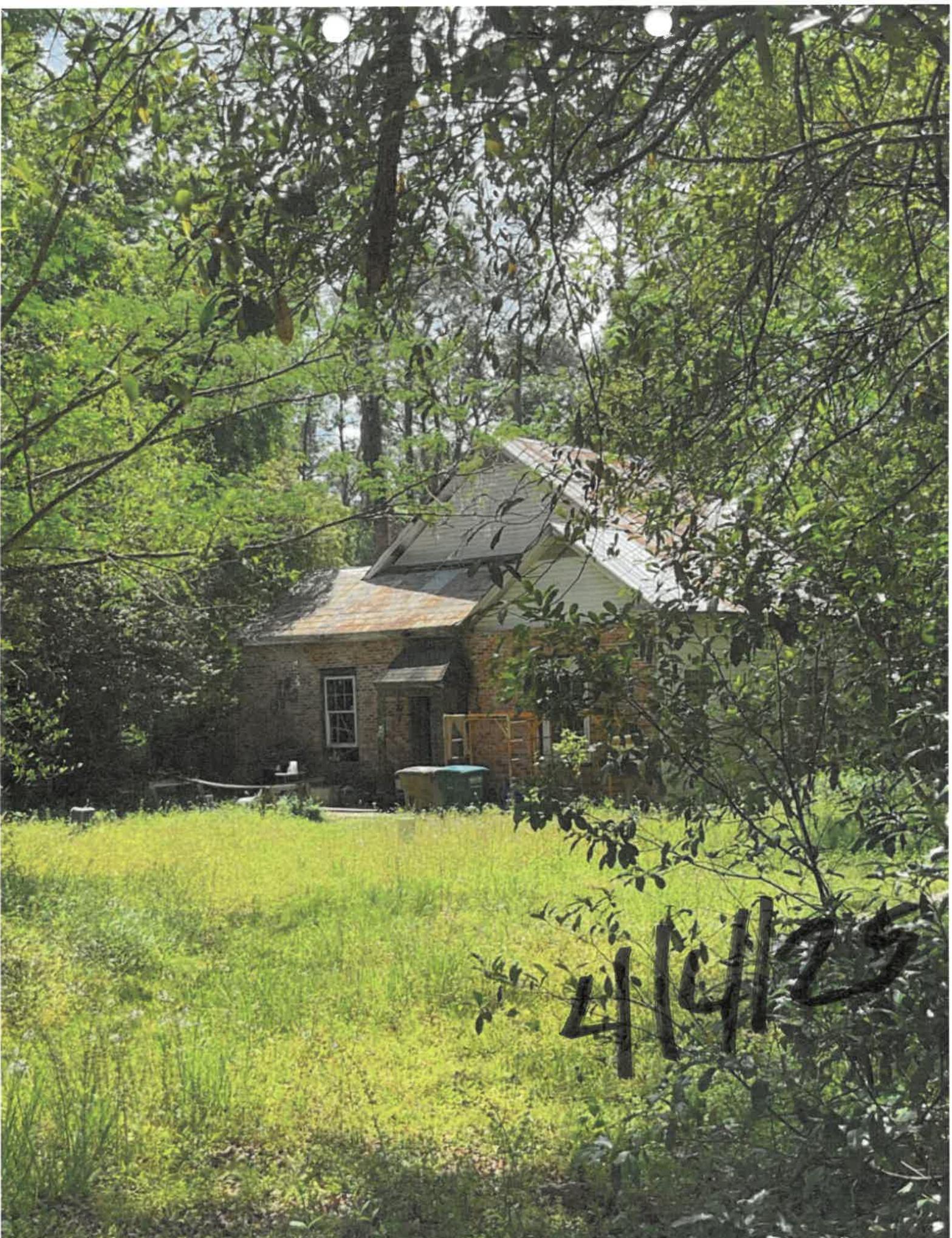
Refused to sign , drop service

 Don White
Print Name of Code Inspector

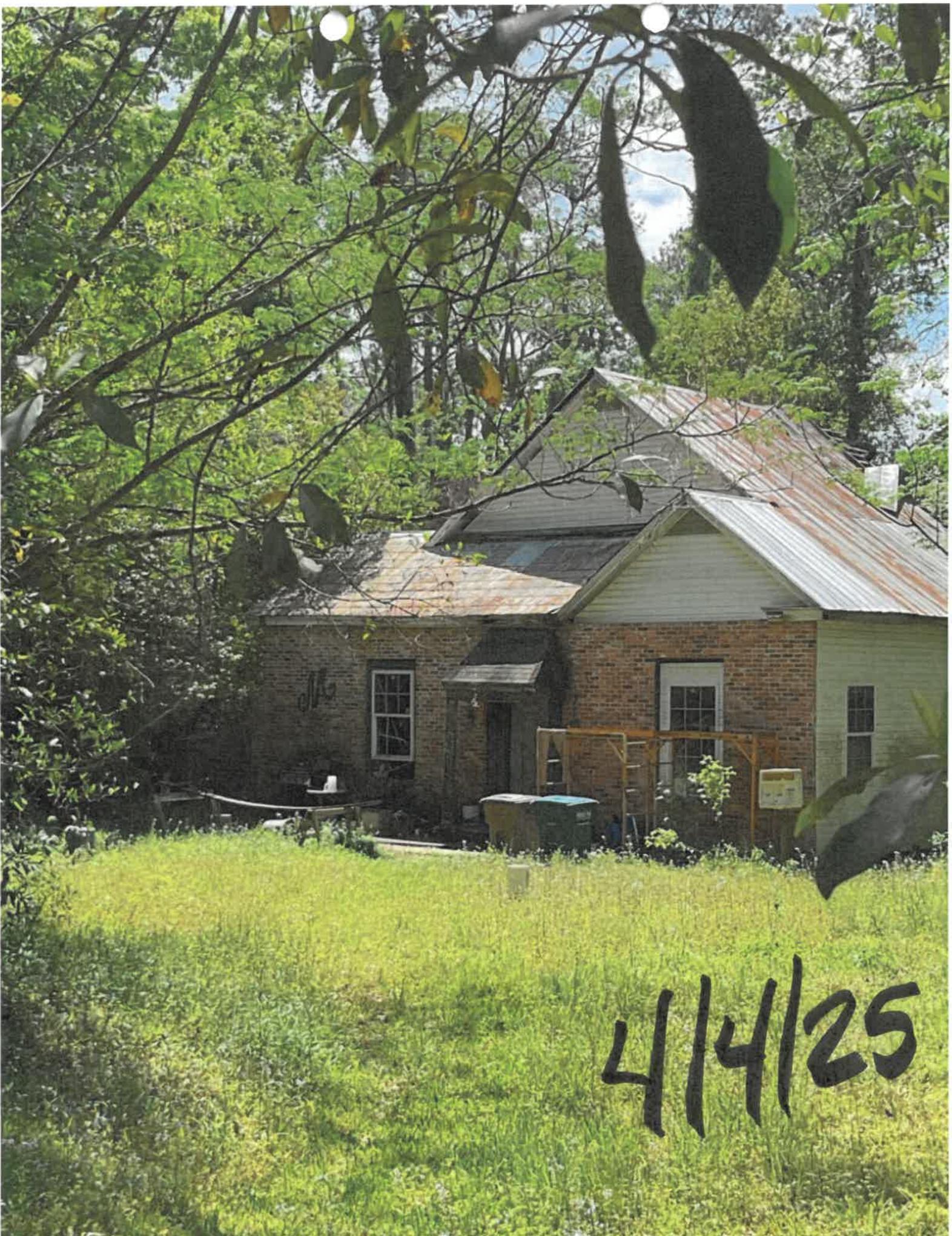
First class mailing



Signature of Code Inspector







414125

44125

PRIVATE
PROPERTY
NO TRESPASSING



CERTIFIED MAIL

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055

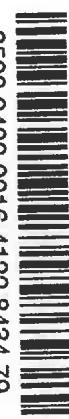


SENDER: COMPLETE THIS SECTION

- 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:

JAMES H JOHNSON III
756 SW ICHETUCKEE
Ave
LAKE CITY, FL 32024



9590 9402 9016 4122 8434 79

2. Article Number (Transfer from service label)
9589 0710 5270 2886 2487 2b

Mail Restricted Delivery

3. Service Type

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature 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

Certified Mail

- A receipt (this portion of the envelope) that is retained by the post office.
- A unique identifier for your item.
- Electronic verification of delivery.
- A record of delivery (including signature) that is retained for a specified period.

Important Reminders:

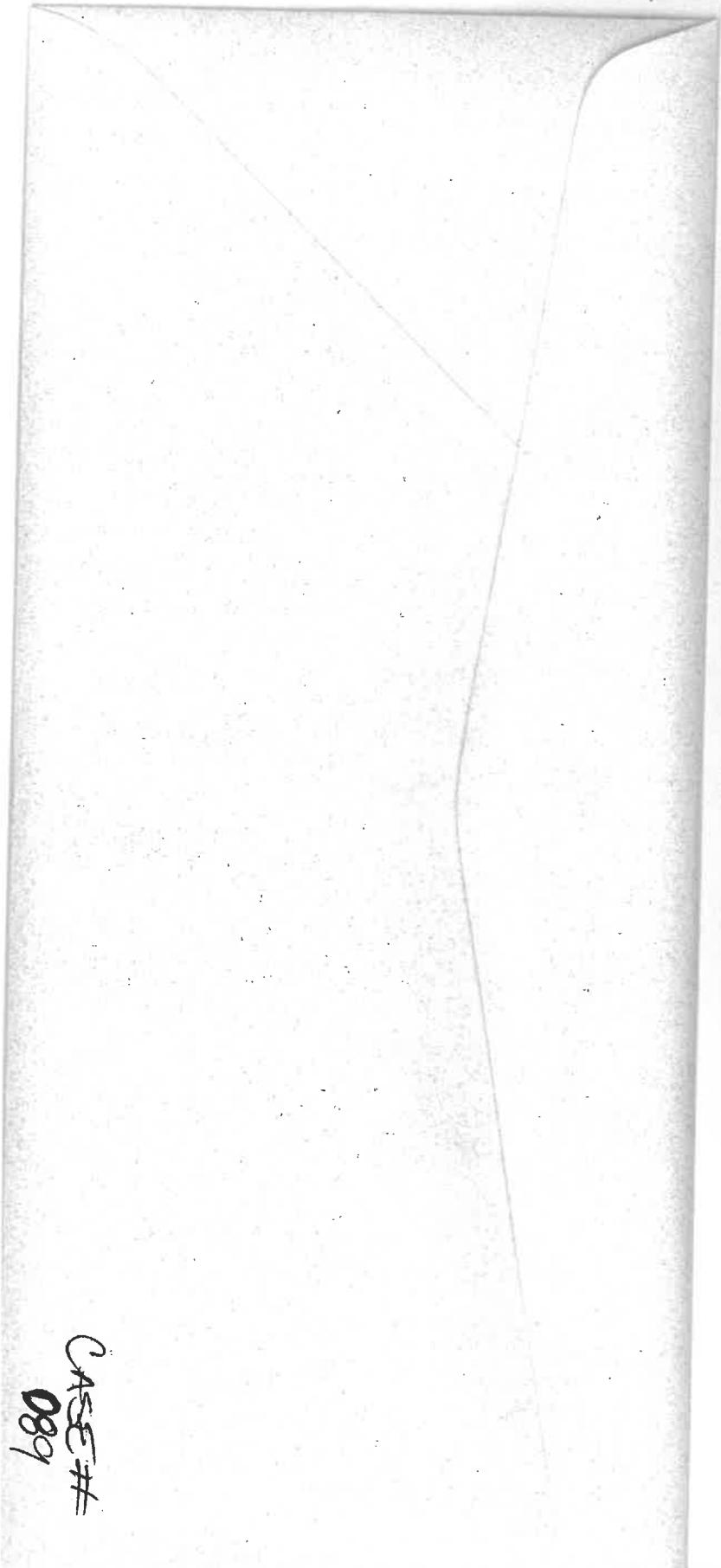
- You may purchase Certified Mail, First-Class Mail®, First-Class Mail with Insurance, or Priority Mail® service.
- Certified Mail service is available for International mail.
- Insurance coverage is available with Certified Mail service. Insurance coverage applies to certain Priority Mail items.
- For an additional fee, an endorsement on the mailpiece may be available for the following services:
 - Return receipt service
 - Proof of delivery (including electronic version. For more information, see the complete PS Form 3800, *Domestic Return Receipt*; attach PS Form 3800 to the back of this card.)

PS Form 3800, January 2000

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

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055

James H Johnson III
756 SW JACKETUCKER Ave
Lake City, FL 32024



CERTIFIED MAIL®



City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055

9589 0710 5270 2886 2484 74
9589 0710 5270 2886 2484 74

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

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

Certified Mail Fee

\$ 4.00

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ 4.00

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$.59

Total Postage and Fees

\$ 4.59

Sent to

James H. Johnson III

Street and Apt. No., or PO Box No.

756 SW ICETE TUCKEE AVE

City, State, ZIP

LAKE CITY, FL 32024

PS Form 3800, Januar 2023 PSN 7530-02-000-9047

See Reverse for Instructions

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:

James H. Johnson III
756 SW 10th Avenue
Lake City, FL 32024



9590 9402 9016 4122 8439 81

2. Article Number (Transfer from service label)

9 5 8 9 0 7 1 0 5 2 7 0 2 8 8 6 2 4 8 4 7 4

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery	
<p>Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Domestic Return Receipt</p> <p>PS Form 3800, January 2002</p> <p>Recipient PS Form 38 Complete PS Form 38 electronic version. For You can request a hard or delivery (including - Return recipient service and delivery services. For an additional fee an extra priority mail item insurance coverage and with Certified Mail service insurance coverage is in immediate mail Certified Mail service is You may purchase First- or Priority Mail service First-Class Mail®, First- Priority Mail service for a specified period. A record of delivery (reci- pient) that is related delivery. Electronic verification of A unique identifier for you a record (this portion of Certified Mail</p>	

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055

James H Johnson III
756 SW Ichetucknee Ave
Lake City, FL 32054

#089

1804

1/2/25

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:
JAMES H. BIRMINGHAM, III
756 SW TICHTUCKEE AVE
LAKE CITY, FL 32024

COMPLETE THIS SECTION ON DELIVERY

A. Signature	<input checked="" type="checkbox"/> Agent
	<input type="checkbox"/> 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



9590 9402 9016 4122 8444 69

2. Article Number (Transfer from service label)
9589 0710 5270 288L 2480 78
(over 3500)

Certified Mail
PS Form 3811, July 2020 PSN 7530-02-000-9053
Domestic Return Receipt

PS Form 3800, January 2000
Receipt of attach PS Form 3811
complete PS Form 3811
electronic version. For
You can request a hard
copy delivery (including
of delivery (including
return receipt service
- return receipt service
the following services:
the following services:
endorsement on the mail
For an additional fee, and
certain Priority Mail items
insurements covering up to
certified Mail service
with Certified Mail service
insurance coverage is not
immediate mail.
Certified Mail service is
or Priority Mail® service.
You may purchase Certi-
fied Mail service
Important Reminders:
■ Insurance coverage is not
immediate mail.
■ Certified Mail service is
for a specified period.
■ A signature that is reliable
for delivery.
■ Electronic verification of
delivery.
■ A unique identifier for you
■ A receipt of this portion of
the service
■ Electronic verification of
delivery.

CERTIFIED MAIL



City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055

9589 0710 5270 2886 2480 78
9589 0710 5270 2886 2480 78

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

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

1405

Certified Mail Fee
\$ 4.00
Extra Services & Fees (check box, add if appropriate)
 Return Receipt (hardcopy) \$ *4.00*
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postmark
Here
09

Postage
\$ *0.00*

Total Postage and Fees
\$ *4.00*

Sent To

JAMES H. JOHNSTON III
Street and Apt. No. or PO Box No.
756 SW ICHE TUCKNEE AVE
City, State, ZIP+4
LAKE CITY, FL 32024

PS Form 3800, January 2013 PSN 7530-02-000-9047

See Reverse for Instructions

III E Avenue

4/26

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

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

OPEN MAIL

Certified Mail Fee \$ 4.00	
Extra Services & Fees (check box, add fee if appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 4.00
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage \$	
Total Postage and Fees \$ 4.00	
Sent to JAMES H JOHNSTON III Street and Apt. No., or P.O. Box No. 419 SW LAKEVIEW AVENUE City, State, ZIP+4 LAKE CITY, FL 32025	

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

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>JAMES H JOHNSON III 49 SW LAKEVIEW AVENUE LAKE CITY, FL 32025</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 2886 2481 08</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

Certified Mail \$

- A receipt (this portion of
- A unique identifier for yo
- Electronic verification of
- delivery.
- A record of delivery (incl
signature) that is retaine
- for a specified period.

Important Reminders:

- You may purchase Certified First-Class Mail®, First-Class or Priority Mail® service.
- Certified Mail service is international mail.
- Insurance coverage is not included with Certified Mail service. Insurance coverage automatically applies to certain Priority Mail items.
- For an additional fee, an endorsement on the mail may include the following services:
 - Return receipt service, proof of delivery (including electronic version). You can request a hard copy of the electronic version. For complete PS Form 3838, *Receipt*, attach PS Form 3838.

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:

James H. Johnson III
756 SW TICKETT AVENUE
LAKE CITY, FL 32024

**2. Article Number (Transfer from service label)**

9590 9402 9016 4122 8444 69

3. Article Number (Transfer from service label)

9589 0710 5270 288L 2480 78

over \$500

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

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

Leslie Steffez

B. Received by (Printed Name)

Leslie Steffez

C. Date of Delivery

7/15/20

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

Agent
 Addressee
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation
 Restricted Delivery
 Collect on Delivery
 Adult Signature Restricted Delivery
 Certified Mail®
 Mail Restricted Delivery

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:

James H. Johnson III
756 SW TICKETT AVENUE
Lake City, FL 32024

**2. Article Number (Transfer from service label)**

9590 9402 9016 4122 8439 81

3. Article Number (Transfer from service label)

9589 0710 5270 288L 2484 74

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

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

Leslie Steffez

B. Received by (Printed Name)

Leslie Steffez

C. Date of Delivery

7/15/20

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

Agent
 Addressee
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation
 Restricted Delivery
 Collect on Delivery
 Adult Signature Restricted Delivery
 Certified Mail®
 Mail Restricted Delivery

Domestic Return Receipt**Domestic Return Receipt**

USPS TRACKING #



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

9590 9402 9016 4122 8444 69

**United States
Postal Service**

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

City of Lake City/ CODE ENF
205 N Marion Ave.
Lake City FL, 32055

TRACKING #



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

9590 9402 9016 4322 8439 83

**United States
Postal Service**

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

City of Lake City/ CODE ENF
205 N Marion Ave.
Lake City FL, 32055