

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:
 GECASSADY, CHIEF OF POLICE
 55 WEST CHURCH ST
 MARTINSVILLE, VA 24112



9590 9402 3915 8060 4856 85

2. Article Number (Transfer from service label)
 7018 1830 0001 9309 1586

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]* Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery
 3/18/19

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

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 type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

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

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

MARTINSVILLE, VA 24112

OFFICIAL USE

Certified Mail Fee	\$3.50
Postage	\$1.30
Extra Services & Fees (check box, add fee \$/lb or rate)	\$2.80
<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
Total Postage and Fees	\$7.60

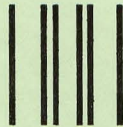
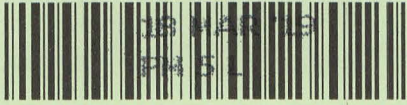
Sent To
 GECASSADY - CHIEF OF POLICE
 Street and Apt. No., or PO Box No.
 55 WEST CHURCH ST
 City, State, ZIP+4®
 MARTINSVILLE, VA 24112

PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions



7018 1830 0001 9309 1586

USPS TRACKING#



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

9590 9402 3915 8060 4856 85

United States
Postal Service

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

KEN & STELLA KORINASH
916 CHALMERS ST, APT A
MARTINSVILLE, VA 24112



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

For delivery information, visit our website at www.usps.com®.
MARTINSVILLE, VA 24112

OFFICIAL USE

Certified Mail Fee	\$3.50
Extra Services & Fees (check box, add fee \$ appropriate)	\$2.80
<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	\$1.30
Total Postage and Fees	\$7.60



Sent To
CC CASSADY - CHIEF OF POLICE
Street and Apt. No., or PO Box No.
55 WEST CHURCH ST
City, State, ZIP+4®
MARTINSVILLE, VA 24112

9590 9402 3915 8060 4856 85

January 19, 2019 (Typed letter March 13, 2019)

Dear Chief of Police of Martinsville Police Dept: G. Edward Cassady

CC: Commonwealth Attorney, Case no C18-3138,

55 West Church Street Municipal Building Martinsville, VA 24112

Martinsville Circuit Court case Discovery Request

Under Virginia Code in regards to discovery requirements for misdemeanor and felony trials in the Commonwealth of Virginia, Brady v Maryland, Giglio v U.S., Brian Hill hereby requests a copy of Police-Camera footage presumably recorded by Sgt. R.D. Jones of Martinsville Police Department between the times of 3:00AM and 4:00AM, September 20, 2018, where I gave statements about the man wearing the hoodie, who had threatened to kill my mother Roberta Hill on the late night of September 20, 2018. Please turn over that Police body camera footage recording evidence copy to my Attorney Scott Albrecht of the Martinsville Public Defender Office, As Soon As Possible. Thank you for your service.

My Regards,

Brian D. Hill (Signed)

Dated January 19, 2019

P.S. Brian Hill has Autism Spectrum Disorder in DMV handicap placard records

Brian David Hill #29947-057 Federal Correctional Institution 1
Old NC Hwy 75; P.O. Box 1000 Butner, NC 27509
JusticeForUSWGO.wordpress.com USWGO

(Letter 1)

Copy of note mailed with letter dated January 19, 2019

**Chief of Police and Commonwealth Attorney in Martinsville,
VA,**

Please acknowledge receipt of letters. Please write response.

Thank you

Brian D. Hill

God bless you!

Note: In a week of no response, I will assume that it was lost and mail another copy. Thanks.

Note from Brian's grandparents. Brian wrote this on January 19, 2019 and January, 20, 2019. He received no response, He sent it again and received no response a week later. After waiting almost two months, his grandparents will have to go to the post office and send this out return receipt requested. You also should know that Brian has been on disability since the age of 19 months; has brittle diabetes requiring insulin shots, has seizures, autism, anxiety and OCD. His actions that night were not normal. He was a victim who was arrested and sent to jail by the police who are supposed to protect its citizens and disabled. Brian's mom and grandparents were at the trial and noticed the prosecuting attorney making derogatory comments and making fun of this disabled citizen of Martinsville in front of his family and many other people in the court room.

KEN & STELLA FORINASH
916 CHALMERS ST, APT A
MARTINSVILLE, VA 24112

G. E. CASSADY, CHIEF OF POLICE
MARTINSVILLE POLICE DEPARTMENT
55 WEST CHURCH ST.
MARTINSVILLE, VA 24112