4/10/12

Dear Bob,

Here are the certified mail Receipts.

Thanks Tom

M-2012-007

CERTIFIED MAIL RECEIPTS
FOR PROOF OF NOTICE TO ADJOINING LANDOWNERS

7009 3410 0000 3645 3089

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CERTIFIED MAIL™ RECEIPT
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MONTE VISTA CO 81144

Postage	$0.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.35
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$5.75

0743
01
Postmark Here
04/02/2012

Sent To: Rio Grande Bridges, Rd

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

City, State, ZIP+4

PS Form 3800, August 2006 — See Reverse for Instructions

7009 3410 0000 3645 3065

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DEL NORTE CO 81132

Postage	$0.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.35
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$5.75

0743
01
Postmark Here
04/02/2012

Sent To: Wayne Nash

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

City, State, ZIP+4

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Rio Grande Rd & Bridges
168 N. Washington
Monte Vista Co
81144

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Tom Romero ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4-3-12

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

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. 7009 3410 0000 3645 3089

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Wayne & Sharon Nash
8934 W CR 7 N
Delnorte Co
81132

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sharon Nash ☑ Agent ☐ Addressee

B. Received by (Printed Name): Sharon Nash | C. Date of Delivery

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

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7009 3410 0000 3645 3065

7009 3410 0000 3645 3041

U.S. Postal Service™
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For delivery information visit our website at www.usps.com®
MONUMENT CO 80132

Postage	$ $0.45	0743
Certified Fee	$2.95	01
Return Receipt Fee (Endorsement Required)	$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $5.75	04/02/2012

Sent To: Doug McDonald
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:
Doug McDonald
1445 Bowstring Rd
Monument Co
80132

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) MIKE McDONALD — C. Date of Delivery 4/7/12

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7009 3410 0000 3645 3041

7009 3410 0000 3645 3034

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ALAMOSA CO 81101

Postage	$ $0.45	0743
Certified Fee	$2.95	01
Return Receipt Fee (Endorsement Required)	$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $5.75	04/02/2012

Sent To: Southway
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:
Henry & Rocky Southway
117 White Pine DR,
Alamosa Co
81101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X H. Tonea ☐ Agent ☐ Addre

B. Received by (Printed Name) H. Tonea — C. Date of Deli 4/3/12

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchan
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7009 3410 0000 3645 3034

7009 3410 0000 3645 3096

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DEL NORTE CO 81132

OFFICIAL USE

Postage	$ $0.45	0743
Certified Fee	$2.95	01
Return Receipt Fee (Endorsement Required)	$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $5.75	04/02/2012

Sent To: Rio Grande County Com.

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

City, State, ZIP+4:

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Rio Grande County Commissioners
925 6th ST suite 207
Delnorte Co
81132

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kristy Dennis ☐ Agent ☐ Addressee

B. Received by (Printed Name): Kristy Dennis — C. Date of Delivery: 4/3/12

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. 7009 3410 0000 3645 3096

7009 3410 0000 3645 3027

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MONTE VISTA CO 81144

OFFICIAL USE

Postage	$ $0.45	0743
Certified Fee	$2.95	01
Return Receipt Fee (Endorsement Required)	$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $5.75	04/02/2012

Sent To: SLV Rec Coop

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

City, State, ZIP+4:

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

SLV Rural Elec Coop
Po Box 3625
Monte Vista Co
81144

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Linda Royba ☐ Age ☐ Add

B. Received by (Printed Name): Linda Royba — C. Date of D: 4-3-1

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merch
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

7009 3410 0000 3645 3027

7009 3410 0000 3645 3058

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DEL NORTE CO 81132

OFFICIAL USE

Postage	$ $0.45	0743
Certified Fee	$2.95	01
Return Receipt Fee (Endorsement Required)	$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $5.75	04/02/2012

Sent To: Vern Romanger

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

City, State, ZIP+4

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Vern Romanger
P.O. Box 218
Delnorte Co

81132

2. Article Number (Transfer from service label) 7009 3410 0000 3645 3058

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Vern Romanger ☐ 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

APR 4 2012

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7009 3410 0000 3645 3072

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MONTE VISTA CO 81144

Postage	$ 0.45	0743
Certified Fee	2.95	01
Return Receipt Fee (Endorsement Required)	2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	0.00	
Total Postage & Fees	$ 5.75	04/02/2012

Sent To: Rio Grande Canal
Street, Apt. No.; or PO Box No.:
City, State, ZIP+4:

PS Form 3800, August 2006 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Rio Grande Canal water users
147 Washington St.
Monte Vista Co
81144

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Connie Pleasant ☐ Agent ☐ Addressee

B. Received by (Printed Name) Connie Pleasant C. Date of Delivery 4-10-12

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

7009 3410 0000 3645 3072

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

M-2012-007

POSTED NOTICE AT ENTRANCE