

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:

Brad Graham
Office of Regional Solicitor
805 SW Broadway, Ste 600
Portland, OR 97205

2. Article Number

(Transfer from service label)

7011 0470 0002 8923 3076

PS Form 3811, February 2004

Domestic Return Receipt w/CC/amend corr prop order 3 cert's 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addresssee
- B. Received by (Printed Name) *Volodymyr* C. Date of Delivery *11/16/11*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Tom Rasmussen, Field Manager
BLM US Dept of Interior - Lakeview
Dist. Office
1301 South G Street
Lakeview, OR 97630

2. Article Number

(Transfer from service label)

7010 0780 0000 0243 5816

PS Form 3811, February 2004

Domestic Return Receipt w/CC/amend corr prop order 3 cert's 102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Stasale* Agent Addresssee
- B. Received by (Printed Name) *J.R. Stasale* C. Date of Delivery *11/16/11*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jesse D. Ratcliff
Assistant Attorney General
Oregon Dept. of Justice
1162 Court St NE
Salem, OR 97301

2. Article Number

(Transfer from service label)

7011 0470 0002 8923 3076

PS Form 3811, February 2004

Domestic Return Receipt w/CC/amend corr prop order 3 cert's 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Jesse D. Ratcliff* Agent Addresssee
- B. Received by (Printed Name) *Jesse D. Ratcliff* C. Date of Delivery *11-16-11*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Office of Administrative Hearings
Joe Allen, Administrative Law Judge
P.O. Box 14020
Salem, OR 97309-4020

2. Article Number

(Transfer from service label)

7011 0470 0002 8923 3052

PS Form 3811, February 2004

Domestic Return Receipt w/CC/amend corr prop order 3 cert's 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addresssee
- B. Received by (Printed Name) *STATE OF OREGON JUDS FAX* C. Date of Delivery *NOV 16 2011*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Courtney Duke, Attorney
Schroeder Law Offices, P.C.
1915 NE Cesar E. Chavez Blvd
Portland, OR 97212-0527

2. Article Number

(Transfer from service label)

7011 0470 0002 8923 3045

PS Form 3811, February 2004

Domestic Return Receipt w/CC/amend corr prop order 3 cert's 102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Courtney Duke* Agent Addresssee
- B. Received by (Printed Name) *Courtney Duke* C. Date of Delivery *11/16/2011*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

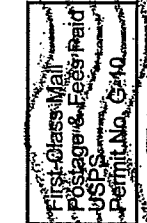
- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE



UNITED STATES POSTAL SERVICE OR 975
15 NOV 2011 PM 1 L



UNITED STATES POSTAL SERVICE
15 NOV 2011 PM 2 L

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

Oregon Water Resources
725 Summer St. NE, Suite A
Salem, OR 97301

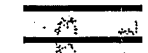
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NOV 17 2011

WATER RESOURCES DEPT
SALEM, OREGON



UNITED STATES POSTAL SERVICE OR 975



UNITED STATES POSTAL SERVICE
15 NOV 2011 PM 2 L

UNITED STATES POSTAL SERVICE
15 NOV 2011 PM 1 L

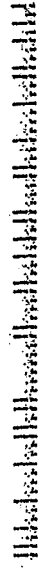
• Sender: Please print your name, address, and ZIP+4 in this box •

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Salem, OR 97301

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Salem, OR 97301

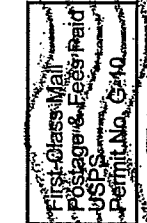
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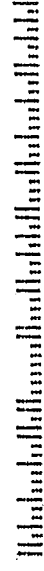
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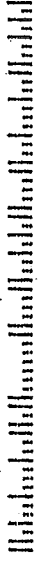
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Permit No. G-10

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Permit No. G-10

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