

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:

Mr. Lance J. Ingalls, Esq.  
Office of the County Attorney  
100 Third Street  
Castle Rock, CO 80104



9590 9402 2789 7069 2082 26

2. Article Number (Transfer from service label)

RE 505 298 341 US

PS Form 3811, July 2015 PSN 7630-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent  
 Addressee

B. Received by (Printed Name)

*Amelia Williams*

C. Date of Delivery

*7/27/16*

D. Is delivery address different from item 1?  Yes  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

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- 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:

Mr. Kevin Milan  
Fire Marshal  
9195 E. Mineral Avenue  
Centennial, CO 80112



9590 9402 2789 7069 2082 19

2. Article Number (Transfer from service label)

RE 505 298 386 US

PS Form 3811, July 2015 PSN 7630-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent  
 Addressee

B. Received by (Printed Name)

*Debrae Hudley*

C. Date of Delivery

*7/30/16*

D. Is delivery address different from item 1?  Yes  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

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.

Article Addressed to:

**Ms. Emily Wrenn**  
 Clerk to Douglas County Commissioners  
 Office of the County Clerk & Recorder  
 100 Third Street  
 Castle Rock, CO 80104

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Return Receipt for Merchandise  
 Collect on Delivery  
 Signature Confirmation  
 Insured Mail (over \$500)

1. Article Addressed to:  
 Ms. Emily Wrenn  
 Clerk to Douglas County Commissioners  
 Office of the County Clerk & Recorder  
 100 Third Street  
 Castle Rock, CO 80104

2. Article Number (Transfer from service label)  
**RE 505 298 338 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

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1. Article Addressed to:  
**Mr. Richard Cosgrove, P.E.**  
 Director of Planning and Construction,  
 Facilities Management  
 c/o Douglas County Schools  
 620 Wilcox Street  
 Castle Rock, CO 80104

2. Article Number (Transfer from service label)  
**RE 505 298 324 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Ken MacKenzie*

B. Received by (Printed Name)  
**Ken MacKenzie**

C. Date of Delivery  
**7/27/16**

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

3. Service Type  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery

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.

Article Addressed to:

**Ms. Emily Wrenn**  
 Clerk to Douglas County Commissioners  
 Office of the County Clerk & Recorder  
 100 Third Street  
 Castle Rock, CO 80104

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Return Receipt for Merchandise  
 Collect on Delivery  
 Signature Confirmation  
 Insured Mail (over \$500)

1. Article Addressed to:  
 Ms. Emily Wrenn  
 Clerk to Douglas County Commissioners  
 Office of the County Clerk & Recorder  
 100 Third Street  
 Castle Rock, CO 80104

2. Article Number (Transfer from service label)  
**RE 505 298 338 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

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1. Article Addressed to:  
**Mr. Ken MacKenzie, P.E.**  
 Executive Director  
 2480 West 26th Avenue, Ste. 156B  
 Denver, CO 80211

2. Article Number (Transfer from service label)  
**RE 505 298 412 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Ken MacKenzie*

B. Received by (Printed Name)  
**Ken MacKenzie**

C. Date of Delivery  
**7/27/16**

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

3. Service Type  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery

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.

Article Addressed to:

**Ms. Pam Brewster**  
 Administrative Secretary  
 P.O. Box 688  
 Franktown, CO 80116

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Return Receipt for Merchandise  
 Collect on Delivery  
 Signature Confirmation  
 Insured Mail (over \$500)

1. Article Addressed to:  
 Ms. Pam Brewster  
 Administrative Secretary  
 P.O. Box 688  
 Franktown, CO 80116

2. Article Number (Transfer from service label)  
**RE 505 298 430 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

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1. Article Addressed to:  
**Mr. Ron Redd**  
 Manager  
 18100 E. Woodman Drive  
 Parker, CO 80138

2. Article Number (Transfer from service label)  
**RE 505 298 390 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Ron Redd*

B. Received by (Printed Name)  
**Ron Redd**

C. Date of Delivery  
**7/27/16**

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

3. Service Type  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery

Print your name and address on the reverse so that we can return the card to you.

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Article Addressed to:

**Ms. Pam Brewster**  
 Administrative Secretary  
 P.O. Box 688  
 Franktown, CO 80116

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Certified Mail®  
 Return Receipt for Merchandise  
 Collect on Delivery  
 Signature Confirmation  
 Insured Mail (over \$500)

1. Article Addressed to:  
 Ms. Pam Brewster  
 Administrative Secretary  
 P.O. Box 688  
 Franktown, CO 80116

2. Article Number (Transfer from service label)  
**RE 505 298 430 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

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1. Article Addressed to:  
**Mr. Ron Redd**  
 Manager  
 18100 E. Woodman Drive  
 Parker, CO 80138

2. Article Number (Transfer from service label)  
**RE 505 298 390 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Ron Redd*

B. Received by (Printed Name)  
**Ron Redd**

C. Date of Delivery  
**7/27/16**

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

3. Service Type  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery

Print your name and address on the reverse so that we can return the card to you.  
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1. Article Addressed to:

**Mr. Tony Spurlock**  
 Douglas County Law Enforcement  
 Authority  
 4000 Justice Way  
 Castle Rock, CO 80109

2. Article Number (Transfer from service label)  
**RE 505 298 355 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

4. Article Addressed to:

**Mr. Robert Ross**  
 Legal Counsel  
 620 Wilcox Street  
 Castle Rock, CO 80104

2. Article Number (Transfer from service label)  
**RE 505 298 372 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

5. Article Addressed to:

**Mr. Bob Pasicznyuk**  
 Director  
 100 Wilcox Street  
 Castle Rock, CO 80104

2. Article Number (Transfer from service label)  
**RE 505 298 369 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

6. Article Addressed to:

**Mr. Chris Quinn**  
 1560 Broadway, Suite 700  
 Denver, CO 80202

2. Article Number (Transfer from service label)  
**RE 505 298 409 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

7. Article Addressed to:

**Mr. Chuck Reid**  
 c/o CliftonLarsonAllen, LLC  
 8390 E. Crescent Pkwy, #500  
 Greenwood Village, CO 80111

2. Article Number (Transfer from service label)  
**RE 505 298 426 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

8. Article Addressed to:

**Mr. Tony Spurlock**  
 Douglas County Law Enforcement  
 Authority  
 4000 Justice Way  
 Castle Rock, CO 80109

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

9. Article Addressed to:

**Mr. Tony Spurlock**  
 Douglas County Law Enforcement  
 Authority  
 4000 Justice Way  
 Castle Rock, CO 80109

2. Article Number (Transfer from service label)  
**RE 505 298 355 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

10. Article Addressed to:

**Mr. Bob Pasicznyuk**  
 Director  
 100 Wilcox Street  
 Castle Rock, CO 80104

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

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1. Article Addressed to:

**Mr. Chuck Reid**  
 c/o CliftonLarsonAllen, LLC  
 8390 E. Crescent Pkwy, #500  
 Greenwood Village, CO 80111

2. Article Number (Transfer from service label)  
**RE 505 298 426 US**

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type  
 Priority Mail Express®  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Insured Mail  
 Insured Mail Restricted Delivery (over \$500)

11. Article Addressed to:

**Mr. Tony Spurlock**  
 Douglas County Law Enforcement  
 Authority  
 4000 Justice Way  
 Castle Rock, CO 80109

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Adult Signature  
 Certified Mail®  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 X *Tanisha Brown*  Agent  Address

B. Received by (Printed Name)  
**Tanisha Brown**

C. Date of Delivery  
**7-27-18**

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

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery

12. Article Addressed to:

**Mr. Bob Pasicznyuk**  
 Director  
 100 Wilcox Street  
 Castle Rock, CO 80104

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery

13. Article Addressed to:

**Mr. Tony Spurlock**  
 Douglas County Law Enforcement  
 Authority  
 4000 Justice Way  
 Castle Rock, CO 80109

3. Service Type  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation  
 Signature Confirmation Restricted Delivery