

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

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

OFFICIAL USE

7016 2140 0000 6914 6200

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Department of Recreation & Parks
Attn: Melinda Gejer
P.O. Box 86328
Los Angeles, CA 90086-0328

Postmark Here

PS Form 3800, April 2007

**U.S. Postal Service™
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7016 2140 0000 6915 0761

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Department of Recreation & Parks
Attn: Melinda Gejer
P.O. Box 86328
Los Angeles, CA 90086-0328

Postmark Here

PS Form 3800, April 2007

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OFFICIAL USE

7016 2140 0000 6915 2772

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Hollywood United Neighborhood
Council
P.O. Box 3272
Hollywood, CA 90078

Postmark Here

PS Form 3800, April 2007

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OFFICIAL USE

7016 2140 0000 6915 0716

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Jennifer Barbosa
21213-B Hawthorne Boulevard
P.O. Box 5122
Torrance, CA 90503

Postmark Here

PS Form 3800, April 2007

**U.S. Postal Service™
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OFFICIAL USE

7016 2140 0000 6915 0723

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To L.A. Co. Dept. of Public Works
Land Development Division
P.O. Box 1460
Alhambra, CA 91802-1460

Postmark Here

PS Form 3800, April 2007

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7016 2140 0000 6915 0778

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Department of Recreation & Parks
Attn: Darryl Ford
P.O. Box 86328
Los Angeles, CA 90086-0328

Postmark Here

PS Form 3800, April 2007

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OFFICIAL USE

7016 2140 0000 6915 0754

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Hollywood Heritage
P.O. Box 2586
Hollywood, CA 90078

Postmark Here

PS Form 3800, April 2007

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7016 2140 0000 6915 0815

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Argyle Civic Association
Ishmael Arrendondo, President
P.O. Box 1935
Hollywood, CA 90078

Postmark Here

PS Form 3800, April 2007

**U.S. Postal Service™
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OFFICIAL USE

7016 2140 0000 6915 2864

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Department of Recreation & Parks
Attn: Darryl Ford
P.O. Box 86328
Los Angeles, CA 90086-0328

Postmark Here

PS Form 3800, April 2007

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7016 2140 0000 6915 0730

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Nancy Ritter, CEQA Coordinator
Office of Env. Planning & Analysis
Dept. of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

Postmark Here

PS Form 3800, April 2007

**U.S. Postal Service™
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OFFICIAL USE

7016 2140 0000 6915 0792

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To L.A. Co. Dept. of Public Works
Land Development Division
P.O. Box 1460
Alhambra, CA 91802-1460

Postmark Here

PS Form 3800, April 2007

**U.S. Postal Service™
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

7016 2140 0000 6915 0808

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Nancy Ritter, CEQA Coordinator
Office of Env. Planning & Analysis
Dept. of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

Postmark Here

PS Form 3800, April 2007

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:

Nancy Ritter, CEQA Coordinator
Office of Env. Planning & Analysis
Dept. of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Date of Delivery
- C. Date of Delivery

Signature: *[Handwritten Signature]*
Received by: *[Handwritten Name]*
Date of Delivery: *30 2018*

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

3. Service Type Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number **7016 2140 0000 6915 0730**
(Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

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:

Department of Recreation & Parks
Attn: Melinda Gejer
P.O. Box 86328
Los Angeles, CA 90086-0328

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Date of Delivery
- C. Date of Delivery

Signature: *[Handwritten Signature]*
Received by: *[Handwritten Name]*
Date of Delivery: *8/25/18*

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

3. Service Type Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number **7016 2140 0000 6914 5200**
(Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

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:

Department of Recreation & Parks
Attn: Darryl Ford
P.O. Box 86328
Los Angeles, CA 90086-0328

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Date of Delivery
- C. Date of Delivery

Signature: *[Handwritten Signature]*
Received by: *[Handwritten Name]*
Date of Delivery: *8/25/18*

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

3. Service Type Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number **7016 2140 0000 6915 2864**
(Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

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:

L.A. Co. Dept. of Public Works
Land Development Division
P.O. Box 1460
Alhambra, CA 91802-1460

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Date of Delivery
- C. Date of Delivery

Signature: *[Handwritten Signature]*
Received by: *[Handwritten Name]*
Date of Delivery: *8/25/18*

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

3. Service Type Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number **7016 2140 0000 6915 0723**
(Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

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:

Hollywood Heritage
P.O. Box 2586
Hollywood, CA 90078

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0754
Domestic Return Receipt

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:

Argyle Civic Association
Ishmael Arrendondo, President
P.O. Box 1935
Hollywood, CA 90078

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0815
Domestic Return Receipt

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:

Nancy Ritter, CEQA Coordinator
Office of Env. Planning & Analysis
Dept. of Toxic Substances Control
P.O. Box 806
Sacramento, CA 95812-0806

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0808
Domestic Return Receipt

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:

Department of Recreation & Parks
Attn: Melinda Gejer
P.O. Box 86328
Los Angeles, CA 90086-0328

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0761
Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Ishmael Arrendondo* Agent Addressee
- B. Received by (Printed Name) *Ishmael Arrendondo* Date of Delivery *9-22-18*
- C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

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:

Hollywood Heritage
P.O. Box 2586
Hollywood, CA 90078

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0822
Domestic Return Receipt

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:

Argyle Civic Association
Ishmael Arrendondo, President
P.O. Box 1935
Hollywood, CA 90078

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0747
Domestic Return Receipt

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:

L.A. Co. Dept. of Public Works
Land Development Division
P.O. Box 1460
Alhambra, CA 91802-1460

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0792
Domestic Return Receipt

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:

Department of Recreation & Parks
Attn: Darryl Ford
P.O. Box 86328
Los Angeles, CA 90086-0328

2. Article Number
(Transfer from service label)
PS Form 3811, July 2013

7016 2140 0000 6915 0778
Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Ishmael Arrendondo* Agent Addressee
- B. Received by (Printed Name) *Ishmael Arrendondo* Date of Delivery *9-22-18*
- C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes