KOShea

Digitally signed by KOShea
Date: 2020.05.06 07:43:19 -04'00'

DES Waste Management Division
29 Hazen Drive; PO Box 95
Concord, NH 03302-0095

Type I-A Modification to Solid Waste Management Facility and Waiver Application Stage VI Landfill Expansion North Country Environmental Services Landfill Certified Mail Receipt Transmittal

581 Trudeau Road
Bethlehem, NH 03574

NHDES Site #: 198704033
Project Type: SW-LNDFILL
Project Number: 0021939

Prepared For:
North Country Environmental Services
1855 VT Route 100
Hyde Park, VT 05655
Phone Number (802) 651-5454
RP Contact Name: John Gay
RP Contact Email: john.gay@casella.com

Prepared By:
CMA Engineers, Inc.
35 Bow Street
Portsmouth, NH 03801
Phone Number: (603) 431-6196
Contact Name: Adam Sandahl, P.E.
Contact Email: asandahl@cmaengineers.com

Date of Application: May 6, 2020

CMA ENGINEERS, INC.
CIVIL | ENVIRONMENTAL | STRUCTURAL

35 Bow Street
Portsmouth
New Hampshire
03801-3819

P: 603|431|6196
www.cmaengineers.com

May 5, 2020

Ms. Jaime Colby, P.E.
Solid Waste Management Bureau
New Hampshire Department of Environmental Services
29 Hazen Drive, P.O. Box 29
Concord, NH 03302-0095

Re: North Country Environmental Services, Inc.
Lined Landfill, Bethlehem, NH
Type IA Permit Modification – Stage VI
Certified Mail Receipts Transmittal
CMA #1063

Dear Ms. Colby:

Please find the enclosed copies of the signed certified mail receipts for required notices of the above referenced permit modification, originally submitted to your attention on March 16, 2020. Please note that three of the abutter notifications came back as undeliverable. Those abutters include:

Map 419, Lots 3&4	Map 419, Lot 10	Map 422, Lot 5
Nicholas D'Angelo	John Connelly	US Forest Service
387 Prospect Street	225 High Street	PO Box 239
Revere, MA 02151	Canton, MA 02021	Bethlehem, NH 03574

We have also enclosed the USPS tracking information for those abutters. Should you have any questions, please do not hesitate to contact me.

Very truly yours,
CMA ENGINEERS, INC.

Adam J. Sandahl, P.E., BCEE
Project Manager

Cc: Joe Gay, NCES (email)
Kevin Roy, NCES (email)
Bryan Gould, CWB (email)
NHDES Onestop

Enclosures: Certified Mail Receipts

1063-NCES-DT-200505-Type IA Certified Mail Receipts to DES-AJS.docx

7019 1120 0001 2521 8097

CERTIFIED MAIL® RECEIPT
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$

Extra Services & Fees *(check box, add fee as appropriate)*
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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$ 4.95

Postmark Here

Sent To NH Fish and Game Department
Endangered Species Coordinator
Street and Apt. No., or PO Box No. 11 Hazen Drive
City, State, ZIP+4® Concord, NH 03301

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7019 1120 0001 2521 8134

U.S. Postal Service™
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- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$ 84.95

Total Postage and Fees
$

Postmark Here

Sent To NH Department of Resources & Economic Development
Natural Heritage Inventory
Street and Apt. No., or PO Box No. 172 Pembroke Road
City, State, ZIP+4® P.O. Box 1856
Concord, NH 03302-1856

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7019 1120 0001 2521 8103

7019 1120 0001 2521 8103

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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 and Fees
$ 4.95

Postmark Here

Sent To Town Clerk
Street and Apt. No., or PO Box No. Town of Bethlehem, NH
2511 Main Street
City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7019 1120 0001 2521 8127

U.S. Postal Service™
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- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$ ~~4.95~~ 84.95

Postmark Here

Sent To NH Department of Justice/Office of Attorney General
Environmental Protection Bureau
Street and Apt. No., or PO Box No.
City, State, ZIP+4® 33 Capitol Street

See Reverse for Instructions

7019 1120 0001 2521 8110

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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7019 1120 0001 2521 8110

OFFICIAL USE

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$

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 and Fees
$ 84.95

Postmark Here

Sent To Gabe Boisseau, Chair
Board of Selectmen
Street and Apt. No., or PO Box No. Town of Bethlehem, NH
City, State, ZIP+4® 2511 Main Street
Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

USPS Tracking®

FAQs >

Track Another Package +

Nh Fish and Game

Tracking Number: 70191120000125218097

Remove ×

Your item has been delivered to an agent at 7:34 am on April 10, 2020 in CONCORD, NH 03301.

Delivered

April 10, 2020 at 7:34 am
Delivered, To Agent
CONCORD, NH 03301

Get Updates ∨

Feedback

Text & Email Updates ∨

Tracking History ∨

Product Information ∨

See Less ∧

Can’t find what you’re looking for?

Go to our FAQs section to find answers to your tracking questions.

USPS Tracking®

FAQs >

Track Another Package +

Natural Heritage Inventory

Tracking Number: 70191120000125218134

Remove ×

Your item has been delivered to an agent for final delivery in CONCORD, NH 03301 on April 10, 2020 at 12:32 pm.

Delivered to Agent

April 10, 2020 at 12:32 pm
Delivered to Agent for Final Delivery
CONCORD, NH 03301

Feedback

Get Updates

Text & Email Updates

Tracking History

Product Information

See Less

Can’t find what you’re looking for?

Go to our FAQs section to find answers to your tracking questions.

USPS Tracking®

FAQs >

Track Another Package +

Town Clerk Town of Bethlehem

Tracking Number: 70191120000125218103

Remove ×

Your item was delivered at 11:06 am on April 10, 2020 in BETHLEHEM, NH 03574.

Delivered

April 10, 2020 at 11:06 am
Delivered
BETHLEHEM, NH 03574

Get Updates

Feedback

Text & Email Updates

Tracking History

Product Information

See Less

Can’t find what you’re looking for?

Go to our FAQs section to find answers to your tracking questions.

USPS Tracking®

FAQs >

Track Another Package +

NH Department of Justice

Tracking Number: 70191120000125218127

Remove ×

Your item was delivered to an individual at the address at 12:28 pm on April 9, 2020 in CONCORD, NH 03301.

Delivered

April 9, 2020 at 12:28 pm
Delivered, Left with Individual
CONCORD, NH 03301

Get Updates

Feedback

Text & Email Updates

Tracking History

Product Information

See Less

Can’t find what you’re looking for?

Go to our FAQs section to find answers to your tracking questions.

USPS Tracking®

FAQs >

Track Another Package +

Board of Selectman

Tracking Number: 70191120000125218110

Remove ×

Your item was delivered at 11:06 am on April 10, 2020 in BETHLEHEM, NH 03574.

Delivered

April 10, 2020 at 11:06 am
Delivered
BETHLEHEM, NH 03574

Get Updates ∨

Feedback

Text & Email Updates ∨

Tracking History ∨

Product Information ∨

See Less ∧

Can’t find what you’re looking for?

Go to our FAQs section to find answers to your tracking questions.

May 05, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 770190262309

Delivery Information:

Status:	Delivered	**Delivered To:**	Receptionist/Front Desk
Signed for by:	D.ONAHUE	**Delivery Location:**	2155 MAIN ST 03574
Service type:	FedEx Priority Overnight		BETHLEHEM, NH, 03574
Special Handling:	Deliver Weekday	**Delivery date:**	Apr 8, 2020 14:01

Shipping Information:

Tracking number:	770190262309	**Ship Date:**	Apr 7, 2020
		Weight:	5.0 LB/2.27 KG

Recipient:
Gabe Boisseau, Town of Bethlehem
2155 Main Street
2nd Floor
BETHLEHEM, NH, US, 03574

Shipper:
Engineering Department, CMA ENGINEERS INC
35 BOW STREET
PORTSMOUTH, NH, US, 03801

Reference 1063 1A Additional Info RJG

Thank you for choosing FedEx

May 05, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 770190283384

Delivery Information:

Status:	Delivered	**Delivered To:**	Receptionist/Front Desk
Signed for by:	D.ONAHUE	**Delivery Location:**	2155 MAIN ST 03574
Service type:	FedEx Priority Overnight		BETHLEHEM, NH, 03574
Special Handling:	Deliver Weekday	**Delivery date:**	Apr 8, 2020 14:01

Shipping Information:

Tracking number:	770190283384	**Ship Date:**	Apr 7, 2020
		Weight:	10.0 LB/4.54 KG

Recipient:
Gabe Boisseau, Town of Bethlehem
2155 Main Street
2nd Floor
BETHLEHEM, NH, US, 03574

Shipper:
Engineering Department, CMA ENGINEERS INC
35 BOW STREET
PORTSMOUTH, NH, US, 03801

Reference 1063 1A Additional Info RJG

Thank you for choosing FedEx

May 05, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 770176304095

Delivery Information:

Status:	Delivered	**Delivered To:**	Shipping/Receiving
Signed for by:	B.WHITMAN	**Delivery Location:**	29 HAZEN DR 03301
Service type:	FedEx Priority Overnight		CONCORD, NH, 03302
Special Handling:	Deliver Weekday	**Delivery date:**	Apr 7, 2020 09:04

Shipping Information:

Tracking number:	770176304095	**Ship Date:**	Apr 6, 2020
		Weight:	10.0 LB/4.54 KG

Recipient:
Tracie Sales, NHDES-Water Pollution
29 Haven Road
PO Box 95
CONCORD, NH, US, 03302

Shipper:
Engineering Department, CMA ENGINEERS INC
35 BOW STREET
PORTSMOUTH, NH, US, 03801

Reference 1063 NCES RJG

Thank you for choosing FedEx

May 05, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 770176299060

Delivery Information:

Status:	Delivered	**Delivered To:**	Shipping/Receiving
Signed for by:	B.WHITMAN	**Delivery Location:**	29 HAZEN DR 03301
Service type:	FedEx Priority Overnight		CONCORD, NH, 03302
Special Handling:	Deliver Weekday	**Delivery date:**	Apr 7, 2020 09:04

Shipping Information:

Tracking number:	770176299060	**Ship Date:**	Apr 6, 2020
		Weight:	10.0 LB/4.54 KG

Recipient:
Tracie Sales, NHDES-Water Pollution
29 Haven Road
PO Box 95
CONCORD, NH, US, 03302

Shipper:
Engineering Department, CMA ENGINEERS INC
35 BOW STREET
PORTSMOUTH, NH, US, 03801

Reference 1063 NCES RJG

Thank you for choosing FedEx

May 05, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 770176245563

Delivery Information:

Status:	Delivered	**Delivered To:**	Residence
Signed for by:	Signature not required	**Delivery Location:**	323 MONROE RD 03740
Service type:	FedEx Priority Overnight		BATH, NH, 03740
Special Handling:	Deliver Weekday; Residential Delivery	**Delivery date:**	Apr 7, 2020 11:03

Shipping Information:

Tracking number:	770176245563	**Ship Date:**	Apr 6, 2020
		Weight:	10.0 LB/4.54 KG

Recipient:
Richard Walling, Ammonoosuc River Local Advisory Com
323 Monroe Road
BATH, NH, US, 03740

Shipper:
Engineering Department, CMA ENGINEERS INC
35 BOW STREET
PORTSMOUTH, NH, US, 03801

Reference 1063 NCES RJG

Proof-of-delivery details appear below; however, no signature is available for this FedEx Express shipment because a signature was not required.

Thank you for choosing FedEx

May 05, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 770176225080

Delivery Information:

Status:	Delivered	**Delivered To:**	Residence
Signed for by:	Signature not required	**Delivery Location:**	323 MONROE RD 03740
Service type:	FedEx Priority Overnight		BATH, NH, 03740
Special Handling:	Deliver Weekday; Residential Delivery	**Delivery date:**	Apr 7, 2020 15:08

Shipping Information:

Tracking number:	770176225080	**Ship Date:**	Apr 6, 2020
		Weight:	10.0 LB/4.54 KG

Recipient:
Richard Walling, Ammonoosuc River Local Advisory Com
323 Monroe Road
BATH, NH, US, 03740

Shipper:
Engineering Department, CMA ENGINEERS INC
35 BOW STREET
PORTSMOUTH, NH, US, 03801

Reference 1063 NCES RJG

Proof-of-delivery details appear below; however, no signature is available for this FedEx Express shipment because a signature was not required.

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Certified Mail Fee
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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 and Fees
$

Postmark Here
MAR 17 2020

Sent To Nicholas D'Angelo

Street and Apt. No., or PO Box No. 387 Prospect Street

City, State, ZIP+4® Revere, MA 02151

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7018 3090 0001 8669 4637

U.S. Postal Service™
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- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$

Postmark Here
MAR 17 2020

Sent To Levy Real Estate LLC

Street and Apt. No., or PO Box No. 3738 Main Street

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7018 3090 0001 8669 4651

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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 and Fees
$

Postmark Here
MAR 17 2020

Sent To Jack Tyrrell
Jan Tyrell

Street and Apt. No., or PO Box No. 580 Trudeau Road

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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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 and Fees
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Postmark Here
MAR 17 2020

Sent To Levy Real Estate LLC

Street and Apt. No., or PO Box No. 3738 Main Street

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Levy Real Estate LLC
3738 Main Street
Bethlehem, NH 03574

9590 9402 5428 9189 5929 98

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4637

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
3/23/20

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No
PO Box 480

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

I Mail
I Mail Restricted Delivery
500)

7018 3090 0001 8669 4651

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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 and Fees
$

Postmark Here
MAR 17 2020

Sent To Jack Tyrrell
Jan Tyrell

Street and Apt. No., or PO Box No. 580 Trudeau Road

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Jack Tyrrell
Jan Tyrell
580 Trudeau Road
Bethlehem, NH 03574

9590 9402 5428 9189 5930 18

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4651

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
3-23-20

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ed Mail
- ed Mail Restricted Delivery
- $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4743

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

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OFFICIAL USE

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 and Fees
$

Postmark Here

Sent To Bethlehem Earth Materials LLC

Street and Apt. No., or PO Box No. PO Box 367

City, State, ZIP+4® Carroll, NH 03595

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Bethlehem Earth Materials LLC
PO Box 367
[redacted], NH 03595

9590 9402 1712 6053 6713 99

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4743

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☒ Addressee

B. Received by *(Printed Name)* RICHARD M. GOULD
C. Date of Delivery 3/21/20

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

TWIN MTN NH

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ed Mail
- ed Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4705

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 2020

Sent To State of New Hampshire
Dept. of Safety
Street and Apt. No., or PO Box No. 33 Hazen Drive
City, State, ZIP+4® Concord, NH 03305

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

State of New Hampshire
Dept. of Safety
33 Hazen Drive
Concord, NH 03305

9590 9402 1712 6053 6713 51

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4705

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Dennis Chamberlain
☐ 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

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

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

7019 1120 0001 2521 8219

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
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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 and Fees
$

Postmark Here
MAR 17 2020

Sent To NH Dept. of Resources and Economic Development

Street and Apt. No., or PO Box No. 172 Pembroke Road

City, State, ZIP+4® Concord, NH 03302

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

NH Dept. of Resources and
Economic Development
172 Pembroke Road
Concord, NH 03302

9590 9402 5447 9189 3453 91

2. Article Number (Transfer from service label)

7019 1120 0001 2521 8219

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Anne S Goldberg
☑ Agent
☐ Addressee

B. Received by (Printed Name) Anne S Goldberg
C. Date of Delivery 3/18

D. Is delivery address different from item 1?
If YES, enter delivery address below:
☐ 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4736

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020
USPS

Sent To New Hampshire State of
Dept. of Natural and Cultural Resource

Street and Apt. No., or PO Box No. 172 Pembroke Road

City, State, ZIP+4® Concord, NH 03302

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

New Hampshire State of
Dept. of Natural and Cultural Resources
172 Pembroke Road
Concord, NH 03302

9590 9402 1712 6053 6713 82

2. Article Number (Transfer from service label)
7018 3090 0001 8669 4736

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

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

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- nsured Mail
- nsured Mail Restricted Delivery
- over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restrict Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation
- ☐ Signature Confirmation Restricted Delivery

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

7019 1120 0001 2521 8196

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

1063
RTG

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020

Sent To
NH Dept. of Justice/
Office of the Attorney General

Street and Apt. No., or PO Box No.
33 Capitol Street

City, State, ZIP+4®
Concord, NH 03301

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

NH Dept. of Justice/
Office of the Attorney General
33 Capitol Street
Concord, NH 03301

9590 9402 1712 6053 6712 69

2. Article Number (Transfer from service label)
7019 1120 0001 2521 8196

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
3/18/2020

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

State of New Hampshire
Department of Justice
33 Capitol St.
Concord, NH 03301

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- nsured Mail
- nsured Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7016 3560 0000 5350 4881

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020

Sent To Boston and Maine Railroad

Street and Apt. No., or PO Box No. Iron Horse Park

City, State, ZIP+4® North Billrica, MA 01862

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Boston and Maine Railroad
Iron Horse Park
North Billrica, MA 01862

9590 9402 1712 6053 6712 45

2. Article Number *(Transfer from service label)*
7016 3560 0000 5350 4881

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)* Stephen McClure
C. Date of Delivery 3-19-20

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®
- ☐ 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

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

7018 3090 0001 8669 4668

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 2020

Sent To Natalie Niles
Sharon Allison

Street and Apt. No., or PO Box No. 36 Coburn Hill Road

City, State, ZIP+4® Concord, MA 01742

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Natalie Niles
Sharon Allison
36 Coburn Hill Road
Concord, MA 01742

9590 9402 5428 9189 5930 25

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4668

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Natalie K. Niles ☐ Agent ☑ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
3-17-2020

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ ed Mail
- ☐ ed Mail Restricted Delivery
- ☐ $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricte Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4675

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 1 . 2020

Sent To Wendall & Nancy Young

Street and Apt. No., or PO Box No. 51 Muchmore Road

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Wendall Young
Nancy Young
51 Muchmore Road
Bethlehem, NH 03574

9590 9402 1712 6053 6713 20

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4675

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Wendall Young
☐ Agent
☒ Addressee

B. Received by *(Printed Name)* Wendall Young

C. Date of Delivery 3/[illegible]/2020

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

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

7016 3560 0000 5350 4874

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 2020

Sent To Susan Nagle

Street and Apt. No., or PO Box No. 47 Katja Lane

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Susan Nagle
47 Katja Lane
Bethlehem, NH 03574

9590 9402 1712 6053 6712 38

2. Article Number *(Transfer from service label)*
7016 3560 0000 5350 4874

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Charles Nagle
☑ Agent
☐ Addressee

B. Received by *(Printed Name)* Charles Nagle
C. Date of Delivery 3-20-20

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- Mail
- Mail Restricted Delivery
- 00)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4613

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here

Sent To John & Patricia Anderson

Street and Apt. No., or PO Box No. 52 Muchmore Road

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

John Anderson
Patricia Anderson
52 Muchmore Road
Bethlehem, NH 03574

9590 9402 5428 9189 5929 74

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4613

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pat Anderson
☐ Agent
☒ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
3/19/2018

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®
- ☐ 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

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

7019 1120 0001 2521 8202

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020
PLYMOUTH NH
USPS

Sent To NH Fish and Game Department

Street and Apt. No., or PO Box No. 11 Hazen Drive

City, State, ZIP+4® Concord, NH 03301

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

NH Fish and Game Department
11 Hazen Drive
Concord, NH 03301

9590 9402 5447 9189 3454 07

2. Article Number *(Transfer from service label)*
7019 1120 0001 2521 8202

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*
G. WALLACE

C. Date of Delivery

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ 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

7018 3090 0001 8669 4767

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020
SPS

Sent To Venessa Palmer

Street and Apt. No., or PO Box No. 266 Maple Street

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Venessa Palmer
266 Maple Street
Bethlehem, NH 03574

9590 9402 1712 6053 6712 21

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4767

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sam Palmer
☐ Agent
☐ Addressee

B. Received by *(Printed Name)* Sam Palmer
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
PO Box 60

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 Restrict Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4729

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

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 and Fees
$

Postmark Here

Sent To Daniel M Bois
Mary J Bois

Street and Apt. No., or PO Box No. 528 Trudeau Road

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Daniel M Bois
Mary J Bois
528 Trudeau Road
Bethlehem, NH 03574

9590 9402 1712 6053 6713 68

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4729

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mary Bois
☐ Agent
☒ Addressee

B. Received by *(Printed Name)* MARY BOIS
C. Date of Delivery 3/19/2020

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ed Mail
- ed Mail Restricted Delivery
- $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4620

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
PORTSMOUTH NH
MAR 17 2020
USPS

Sent To Brian Cook
Kathryn Cook

Street and Apt. No., or PO Box No. 3768 Main Street

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Brian Cook
Kathryn Cook
3768 Main Street
Bethlehem, NH 03574

9590 9402 5428 9189 5929 81

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4620

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☒ Addressee

B. Received by *(Printed Name)* Brian Cook
C. Date of Delivery 3/19/2020

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- red Mail
- red Mail Restricted Delivery
- $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restri Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmatio
- ☐ Signature Confirmatio Restricted Delivery

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

7019 1120 0001 2521 8189

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
NH 03801
MAR 17 2020
USPS

Sent To Town of Bethlehem

Street and Apt. No., or PO Box No. 2511 Main Street

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Town of Bethlehem
2511 Main Street
Bethlehem, NH 03574

9590 9402 1712 6053 6712 52

2. Article Number *(Transfer from service label)*
7019 1120 0001 2521 8189

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Nicole McGrath
☒ Agent
☐ Addressee

B. Received by *(Printed Name)* Nicole McGrath
C. Date of Delivery 3/19/20

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No
PO Box 189

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

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

7018 3090 0001 8669 4583

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here 2020

Sent To Shurtleff

Street and Apt. No., or PO Box No. 11 Vinton Drive

City, State, ZIP+4® Penacook, NH 03303

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Shurtleff
11 Vinton Drive
Penacook, NH 03303

9590 9402 5428 9189 5929 67

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4583

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
3/9/20

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ed Mail
- ed Mail Restricted Delivery
- $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7018 3090 0001 8669 4682

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

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

OFFICIAL USE

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 and Fees
$

PORTSMOUTH NH 03801
Postmark Here
MAR 17 2020
USPS

Sent To Marie C. Bell
Philip W. Bell

Street and Apt. No., or PO Box No. 51 Trudeau Road

City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Marie C. Bell
Philip W. Bell
51 Trudeau Road
Bethlehem, NH 03574

9590 9402 1712 6053 6713 37

2. Article Number *(Transfer from service label)*
7018 3090 0001 8669 4682

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Phil Bell
☐ Agent
☒ Addressee

B. Received by *(Printed Name)* Phil Bell
C. Date of Delivery 3/20/2020

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®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ed Mail
- ed Mail Restricted Delivery
- $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restrict Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

S, INC.
RUCTURAL

CERTIFIED MAIL®

7018 3090 0001 8669 4699

FIRST-CLASS

PITNEY BOWES
US POSTAGE
02 1P $ 006.90⁰
0001176366 MAR 17 2020
MAILED FROM ZIP CODE 03801

U.S. Forest Service
C/O Ammonoosuc Ranger Dist.
PO Box 239
Bethlehem, NH 03574

Name
1st Notice 3/9
2nd Notice
Return

NIXIE 015 FE 1 0003/21/20

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

20127473254 UTF BC: 03801381935 *2584-01142-17-43
0057480290 P0819

7018 3090 0001 8669 4699

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

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020

Sent To U.S. Forest Service
C/O Ammonoosuc Ranger Dist.
Street and Apt. No., or PO Box No. PO Box 239
City, State, ZIP+4® Bethlehem, NH 03574

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7018 3090 0001 8669 4712

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

1063
RSG

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

OFFICIAL USE

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 and Fees
$

Postmark Here
MAR 17 2020
03801

Sent To John Connelly
Brown Robert Etal

Street and Apt. No., or PO Box No. 225 High Street

City, State, ZIP+4® Canton, MA 02021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

RN ADDRESS, FOLD AT DOTTED LINE

TIFIED MAIL®

] 0001 8669 4712

FIRST-CLASS

PITNEY BOWES
US POSTAGE
02 1P $ 006.90⁰
0001176366 MAR 17 2020
MAILED FROM ZIP CODE 03801

John Connelly
Brown Robert Etal
225 High Street
Canton, MA 02021

1st NOTICE
2nd NOTICE
RETURNED

NIXIE 015 FE 1 0003/22/20

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

5 UTF3 BC: 03801381935 *2584-01140-17-43
1>3819

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Nicholas D'Angelo
387 Prospect Street
Revere, MA0 2151

9590 9402 5428 9189 5930 01

2. Article Number (Transfer from service label)

7018 3090 0001 8669 4644

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ sured Mail
☐ sured Mail Restricted Delivery
ver $500)

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

Domestic Return Receipt

A ENGINEERS, INC.
ENVIRONMENTAL | STRUCTURAL

Street
outh, New Hampshire
-3819

CERTIFIED MAIL®

7018 3090 0001 8669 4644

FIRST-CLASS

PITNEY BOWES
US POSTAGE
$ 006.90⁰
02 1P
0001176366 MAR 17 2020
MAILED FROM ZIP CODE 03801

Nicholas D'Angelo
387 Prospect Street

UNCLAIMED

3-24
4-24

MA
GINEERS