	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	Complete items 1, 2, and 3.	A. Signature
	Print your name and address on the reverse so that we can return the card to you.	X ☐ Agent ☐ Addressee
	Attach this card to the back of the malipiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
	Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter defivery address below; ☐ No
	LA County Metropolitan Transportation	in the state delivery described below.
	Authority Emmanuel 'Cris' Liban, Executive Officer	under the second
	Environmental Services Department	
	One Gateway Plaza	
	9590 9402 2538 6306 2254 68	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail Restricted Delivery
	2. Article Number (Transfer from service label)	☐ Collect on Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
	2016 5740 0000 P47F 2933	☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Signature Confirmation Restricted Delivery
	PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt
i		
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	■ Complete Items 1, 2, and 3.	A. Signature
	Print your name and address on the reverse so that we can return the card to you.	X (17)
	Attach this card to the back of the mailplece,	B. Received by (Printed Name) C. Date of Delivery
	or on the front if space permits. 1. Article Addressed to:	D, is delivery address different from item 1? Yes
	County of LA, Department of Regional Planning	If YES, enter delivery address below: No
	Amy Bodek, Director of Planning	
	LA County Department of Regional Planning	
i i	320 W. Temple Street, 13th Floor Los Angeles, CA 90012	
		3. Service Type ☐ Priority Mail Express®
		☐ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Registered Mail Restricted
	9590 9402 2538 6306 2256 11	☐ Certified Mail® Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for
	Article Number (Transfer from service label)	☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
•	7016 2140 0000 6916 5796	☐ Insured Mail ☐ Signature Confirmation ☐ Insured Mail Restricted Delivery (over \$500) ☐ Restricted Delivery
	PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	■ Complete items 1, 2, and 3.	A. Signature
	Print your name and address on the reverse	X /// Agent
	so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
	Attach this card to the back of the mallpiece, or on the front if space permits.	VTimmons 12/23
	1. Article Addressed to:	D. Is delivery address different from item 1?
	US Fish and Wildlife Service	If YES, enter delivery address below: No
	John Hell, Assistant Regional Director, External Affairs	
	Sacramento Fish and Wildlife Office	
	2800 Cottage Way, Rm W-2605	
	Sacramento, CA 95825-1846	3. Service Type ☐ Priority Mail Express®
		☐ Adult Signature ☐ Registered Mail™ ☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricte
	9590 9402 2538 6306 2258 64	☐ Certified Mail® Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for
	2. Article Number (Transfer from service label)	☐ Collect on Delivery
	2016 5740 0000 rajr 2420	☐ Insured Mail ☐ Signature Confirmation ☐ Insured Mail Restricted Delivery Restricted Delivery

1	
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. Article Addressed to: Los Angeles County Alyson Stewart, Senior Regional Planner Department of Regional Planning - ALUC 320 West Temple Street, 13th Floor Los Angeles, CA 90012 9590 9402 2538 6306 2258 88 2. Article Number (Transfer from service label) 7016 2140 0000 6916 5994	A. Signature X
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt
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: Los Angeles County Bruce Durbin, Supervising Regional Planner Department of Regional Planning - ALUC 320 West Temple Street, 13th Floor	A. Signature X
2. Article Number (Transfer from service label) 7016 2140 100 6916 6007 PS Form 3811, July 2015 PSN 7530-02-000-9053	3. Service Type Adult Signature Adult Signature Adult Signature Certified Mail® Certified Mail® Collect on Delivery Insured Mail Restricted Mail Restricte
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: LA County Metropolitan Transportation Authority David Mieger, Executive Officer Transit Corridors Planning One Gateway Plaza - Mail Stop 99-23-4 Los Angeles, CA 90012	COMPLETE THIS SECTION ON DELIVERY A. Signature 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
9590 9402 2538 6306 2255 98 2. Article Number (Transfer from service label)	Adult Signature Restricted Delivery Adult Signature Restricted Delivery Registered Mail Restricted Delivery

*		74.9%
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON	DELIVERY
 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 mailplece, or on the front if space permits. Article Addressed to: LA County Department of Public Works Water Resources Division (LA County Flood District) Angela R. George-Moody, Deputy Director, P.O. Box 1460 Alhambra CA 91802-1460 	A. Signature B. Received by (Printed Name) D. Is delivery address different from If YES, enter delivery address	
9590 9402 2538 6306 2255 50	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restrict Delivery ☐ Return Receipt for Merchandise
12. Article Number (Transfer from service label)	☐ Collect on Delivery Restricted Delivery ☐ Insured Mall ☐ Insured Mall Restricted Delivery	 ☐ Signature Confirmation ☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt