



Legal Notices Transmittal and Scanning Separator Sheet

Legal Notice Type: Legal Mailings

Date of Transfer to ERM: 6/26/2012

Page Count: 1

Meeting Date: 6/20/2012

Meeting Type: City Council <=>

Case Number(s): 106740 <=>

Subject of Affidavit: 1123 Chapman Drive - TRUSTEE CLARK COUNTY TREASURER C/O MARY LOU CLEMMONS, L P <=>

Record Series: Legal Notices

LRDA Number: 2007-1717

Retention: Permanent

File By: Meeting Date



Prepared By: ~~as~~

Scanned By: _____

SCANNED

JUN 26 2012

QC By: _____

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Mary Lou Clemmons</i></p> <p>B. Received by (Printed Name) C. Date of Delivery M. CLEMMONS</p>
<p>1. Article Addressed to:</p> <p>6/20/2012 Case #106740 Trustee Clark County Treasurer c/o Mary Lou Clemmons, LP c/o Mike Clemmons 8275 Hickam Avenue Las Vegas, NV 89129-4848</p>	<p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: PO Box 120030 ANTIMONY 84712</p> <p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <i>MPB</i> (Transfer from service)</p>	<p>7008 1140 0002 2467 8639</p>
<p>PS Form 3811, February 2004 III III Domestic Return Receipt 102595-02-M-1540</p>	