CERTIFIED MAIL™

CITY of LAS VEGAS

OFFICE OF THE CITY CLERK
CITY HALL
495 S. MAIN ST.
LAS VEGAS, NEVADA 89101-6318

7012 0470 0000 9891 4172

U.S. POSTAGE PITNEY BOWES
ZIP 89101 $ 006.72
02 1W
0001398173 AUG 04 201

RETURN SERVICE REQUESTED
OFFICIAL NOTICE OF PUBLIC HEARING

GA 33587 • FM-0456-06-12

UNCLAIMED

Case: VAC-59533

4/n
8-6

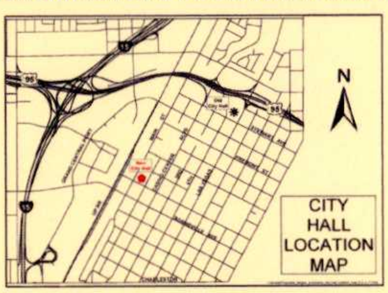
Mr. Yerramsetti
303 Cotton LLC
11056 Onslow Ct.
Las Vegas, Nevada 89135

NIXIE 891 DE 1260 0009/22/15
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 89101631895 *0194-01461-22-33

113

City of Las Vegas
Office Of The City Clerk
495 S. Main St., City Hall
Las Vegas, Nevada 89101

Return Service Requested
Official Notice of Public Hearing



If you wish to file your protest or support on this request, check the appropriate box below and return this card in an envelope with postage to the Office Of The City Clerk at the address listed above, fax this side of this card to (702) 382-4803 or make your comments at www.lasvegasnevada.gov. If you would like to contact your Council Representative, please call (702) 229-6405.

☐ I SUPPORT this Request ☐ I OPPOSE this Request

Please use available blank space on card for your comments.
VAC-59533 [PRJ-59479]
City Council Meeting of August 19, 2015

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:

Case: VAC-59533
12518401032
LOTS2DISCOVER L L C
9225 W FLAMINGO RD #190
LAS VEGAS NV 89147

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) R. Harper C. Date of Delivery

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

HENDERSON STATION AUG 6 2015 NV 89013 USPS

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number (*Transfer from service label*) 7012 0470 0000 9891 4219

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Case: VAC-59533
12518401002
DRAGO SURVIVORS TRUST
STETTS CHARLES TRS
174 TIERRA BONITA CT
HENDERSON NV 89074

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Charles E Stetts ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) Charles E. Stetts C. Date of Delivery

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

HENDERSON STATION AUG 7 2015 NV 89012

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number (*Transfer from service label*) 7012 0470 0000 9891 4202

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Case: VAC-59533
Mr. Charles Stetts
Drago Survivors Trust
174 Tierra Bonita Ct.
Henderson, Nevada 89074

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Charles E Stetts ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) Charles E Stetts C. Date of Delivery

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

HENDERSON STATION AUG 7 2015 NV 89012

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number (*Transfer from service label*) 7012 0470 0000 9891 4189

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Case: VAC-59533
Mr. Mark Jones
DR Horton
1081 Whitney Ranch Drive, Ste. 141
Henderson, Nevada 89014

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X C Rex ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C-Rex
C. Date of Delivery 8/6/15

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

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7012 0470 0000 9891 4165

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Case: VAC-59533
Kelly Wittwer
Triton Engineering
6757 West Charleston Blvd., Ste. B
Las Vegas, Nevada 89146

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X James Isaac ☐ 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
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7012 0470 0000 9891 4141

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540