

From: [Hill, Shannon](#)
To: [Downtown West Project](#)
Subject: FW: Certified Mailing Receipts X2
Date: Thursday, November 12, 2020 9:06:01 AM
Attachments: [20201106110910889.pdf](#)

From: Duba, Ron
Sent: Friday, November 6, 2020 3:38 PM
To: Hill, Shannon <Shannon.Hill@sanjoseca.gov>
Subject: Certified Mailing Receipts X2

Hi Shannon,

I placed this on your office chair.

Take Care & Be Safe! {" ;+)

Ron

PBCE - Administration
City Hall, Tower Bldg. - 3rd Floor
Lobby Reception Desk: (408) 535-7806

USPS TRACKING #

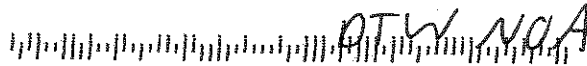


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 2133 6132 3845 36 NOV 06 2020

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•
CITY OF SAN JOSE
PLANNING, BUILDING AND CODE ENFORCEMENT
Shannon Hill
Planner, City of San Jose
Department of Planning, Building and Code
Enforcement
200 E Santa Clara St, Tower 3F,
San Jose CA 95113



USPS TRACKING #

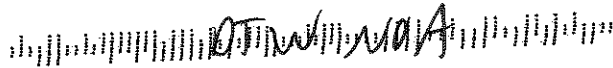




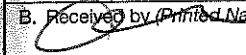
First-Class Mail
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9590 9402 2133 6132 3845 67 NOV 06 2020


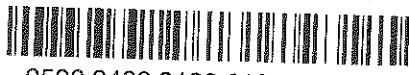
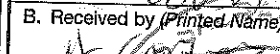
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Department of Planning, Building and Code
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200 E Santa Clara St, Tower 3F,
San Jose CA 95113



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	A. Signature  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: Federal Railroad Administration Region 7 Railroad Safety Office 801 I Street, Suite 466 Sacramento, CA 95814  9590 9402 2133 6132 3845 36	B. Received by (Printed Name)  C. Date of Delivery
2. Article Number (Transfer from service label) 7009 2820 0002 0334 1269	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, July 2015 PSN 7530-02-000-9053	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	A. Signature  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: U.S. Fish and Wildlife Service Bay-Delta Fish & Wildlife Office 650 Capitol Mall, 8th Floor, Room 8-300 Sacramento, CA 95814  9590 9402 2133 6132 3845 67	B. Received by (Printed Name)  C. Date of Delivery OCT 23 2020
2. Article Number (Transfer from service label) 7009 2820 0002 0334 1290	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, July 2015 PSN 7530-02-000-9053	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery

Domestic Return Receipt