

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW MEXICO

| | | |
|---|---|-----------------------|
| UNITED STATES OF AMERICA |) | |
| and |) | |
| STATE OF NEW MEXICO, <i>ex rel.</i> STATE |) | |
| ENGINEER, |) | |
| |) | |
| Plaintiffs, |) | |
| |) | No. 01cv00072 MV/LFC |
| and |) | |
| |) | ZUNI RIVER BASIN |
| ZUNI INDIAN TRIBE, NAVAJO NATION, |) | ADJUDICATION |
| |) | |
| Plaintiffs in Intervention, |) | |
| |) | DECLARATION OF YVONNE |
| |) | M. MARSH IN SUPPORT |
| |) | OF PLAINTIFFS' MOTION |
| |) | FOR DEFAULT JUDGMENT |
| |) | |
| |) | ZRB-1-0191 |
| v. |) | |
| |) | |
| A & R PRODUCTIONS, et al. |) | |
| |) | |
| Defendants. |) | |
| |) | |

I, Yvonne M. Marsh, am employed as a Paralegal Specialist with the Department of Justice and have been assigned to work in support of counsel for the United States in the above-captioned case.

A. Pursuant to the *Procedural and Scheduling Order for the Adjudication of Water Rights Claims In Sub-Areas 4 and 8 of the Zuni River Stream System* (Doc. No. 355) and the September 27, 2006 *Order Granting Joint Motion to Amend Procedural and Scheduling Orders and Establish or Revise Deadlines for Defendants to Return Requests for Consultation and Submit Subfile Answers* (Doc. No. 837), Defendants in the Zuni River Basin Adjudication

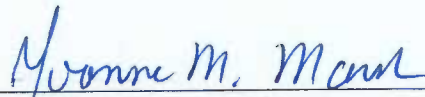
were provided a service packet that included a proposed Consent Order, Request for Consultation form, Notice of Water Rights Adjudication, and if the Defendants had not been served process or had not voluntarily waived such service, a copy of the Amended 2003 Complaint, a Request for Waiver of Service of Summons, and two copies of a Waiver of Service of Summons with a prepaid return envelope. The packet also included a letter from the United States explaining the purpose of the forms and to whom and when documents were to be mailed or provided if the Defendants chose to respond. The documents were mailed to the Defendant's attorney of record or to the Defendant's mailing address via certified mail, return receipt requested.

B. The service packet to Kevin Zajicek and Karlene Zajicek (ZRB-1-0191), was mailed to the Defendants' address of record. The original Postal Service Form 3811, Domestic Return Receipt was returned signed and dated August 27, 2010. A copy of Postal Service Form 3811 is attached to this declaration.

C. In addition, a revised consent order was mailed to the Defendants' address of record. The original Postal Service Form 3811, Domestic Return Receipt was returned signed and dated December 23, 2011. A copy of Postal Service Form 3811 is attached to this declaration.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Dated: February 7, 2013



YVONNE M. MARSH
U.S. Department of Justice
999 18th Street, Suite 370
South Terrace
Denver, CO 80202
(303) 844-1355

7RB-1-0191 SP

| 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>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;">Kevin and Karlene Zajicek HC 61 Box 59 Ramah, NM 87321</p> </div> <p>2. Article Number (Transfer from service label)</p> | <p>A. Signature X <i>Karlene Zajicek</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>Karlene Zajicek</i> <i>8/27/10</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" 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 checked="" type="checkbox"/> Yes</p> |
| <p>7008 1830 0001 5244 5002</p> | |
| <p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p> | |

7RB-1-0191

| 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>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p style="text-align: center;">Kevin Zajicek Karlene Zajicek HC 61 Box 59 Ramah, NM 87321</p> </div> <p>2. Article Number (Transfer from service label)</p> | <p>A. Signature X <i>Karlene Zajicek</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>Karlene Zajicek</i> <i>12/23/11</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" 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>7008 1830 0000 5321 5346</p> | |
| <p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p> | |