

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

UNITED STATES OF AMERICA, and )  
STATE OF NEW MEXICO ex rel. STATE )  
ENGINEER, )  
 )  
Plaintiffs, )  
 )  
and )  
 )  
ZUNI INDIAN TRIBE, NAVAJO NATION, )  
 )  
Plaintiffs in Intervention, )  
 )  
v. )  
 )  
A & R PRODUCTIONS, et al., )  
 )  
Defendants. )  
 )  
\_\_\_\_\_ )

**No. 01CV00072-MV/WPL**  
  
ZUNI RIVER BASIN  
ADJUDICATION  
  
Subfile No. ZRB-4-0168

**DECLARATION OF KARMEN MILLER IN SUPPORT OF PLAINTIFFS’  
MOTION FOR DEFAULT JUDGMENT**

I, Karmen Miller, 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 1, 2, and 3, (Excluding Ramah) of the Zuni River Stream System* (Doc. No. 838), 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, 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 Defendants' mailing address via certified mail, return receipt requested.

B. The service packet to John and Earnestine Tolman, was mailed to the Defendants' address of record. The original Postal Service Form 3811, Domestic Return Receipt was signed and returned to our office on January 20, 2016. A copy of Postal Service Form 3811 is attached to this declaration. We received no response from the Defendants.

C. John and Earnestine Tolman was served with process on March 9, 2016 (Doc. No. 3227).

D. Pursuant to the Service Members Civil Relief Act, 50 App. U.S.C.A. § 521 (2012), I conducted a search in the following databases to determine if either of the Defendants, John and Earnestine Tolman, is currently in active military service: Westlaw - People Finder, LexisNexis - Military Finder, and the Service Members Civil Relief Act (SCRA) website. These sources do not indicate that either Defendant is on active military duty status.

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

Dated: May 12, 2016

/s/ Karmen Miller  
KARMEN MILLER  
U.S. Department of Justice  
999 18<sup>th</sup> Street, Suite 370  
South Terrace  
Denver, CO 80202  
(303) 844-1355

ZRB-4-0168 Svc. Packet

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>John Tolman</i> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p>	
<p>1. Article Addressed to:  <span style="font-size: 1.2em; color: blue;">John and Earnesine Tolman                      8506 Vistadale Dr.                      Humble, TX 77338</span></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>2. Article Number                      (Transfer from service label)</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <span style="float: right;"><input type="checkbox"/> Express Mail</span>  <input type="checkbox"/> Registered <span style="float: right;"><input type="checkbox"/> Return Receipt for Merchandise</span>  <input type="checkbox"/> Insured Mail <span style="float: right;"><input type="checkbox"/> C.O.D.</span></p>	
<p>7014 2870 0001 8398 8598</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004 <span style="margin-left: 100px;">Domestic Return Receipt</span> <span style="float: right;">102595-02-M-1540</span></p>		

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