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Adult Signature Required \$ \_\_\_\_\_

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Postage \$ \_\_\_\_\_

Total Post \$ \_\_\_\_\_

Sent To **AFFECTED MUNICIPALITY (D.R.L.)**  
**DAVE JEFFERS, INTERIM TOWN PLANNER**  
 Street and **TOWN OF SANBORNTON, NH**  
**573 SANBORN ROAD**  
 City, State **SANBORNTON, NH 03269**

PS Form 3811-10 11/2017 HEARING

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Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Total Post \$ \_\_\_\_\_

Sent To **REGIONAL PLANNING COMMISSION (D.R.L.)**  
**JEFF HAYES, EXECUTIVE DIRECTOR**  
 Street and **LAKES REGION PLANNING COMMISSION**  
**103 MAIN STREET, SUITE #3**  
 City, State **MEREDITH, NH 03253**

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