

Gillett Civic Group, Inc.

PO Box 116
Gillett, AR 72055

August 9, 2010

To: Arkansas State Board of Education

Re: Notice of Public Hearing

In accordance with the 2010 Open-Enrollment Public Charter School Application Checklist the attached letters were mailed on August 9, 2010 to the following superintendents of the contiguous school districts from which Gillett Heritage Academy is likely to draw students for the purpose of enrollment.

If you have any questions, please call me at 888-764-3130.

Sincerely,



Derek Menard,
President

www.gillettcivicgroup.com Ph 888-764-3130 Fax 870-946-2757 gillettcivicgroup@gmail.com

Attachment 3 c

Gillett Civic Group, Inc.

Po Box 116
Gillett, AR 72055

August 9, 2010

To: DeWitt School District
Superintendent's Office
Attn: Mr. Gary Wayman
422 West 1st Street
DeWitt, AR 72042

Dear Mr. Wayman,

In accordance with the requirements for the 2010 open enrollment charter school application we are notifying you of the public hearing to be held Thursday, August 12, 2010 at the St. Paul Lutheran Church Fellowship Hall in Gillett at 7:00 pm.

If you have any questions, please call me at 888-764-3130.

Sincerely,

Derek Menard

Derek Menard,
President

www.gillettecivicgroup

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com.		
DE WITT AR 72042		
Postage	\$ 0.44	0342
Certified Fee	\$2.80	
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 5.54	
Sent To: DeWitt School Dist. - Gary Wayman Street, Apt. No., or PO Box No.: 422 West 1 st Street City, State, ZIP+4: DeWitt, AR 72042		
PS Form 3800, August 2006 See Reverse for Instructions		

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. 	A. Signature <i>Shirley Dillion</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: DeWitt School District Attn: Mr. Gary Wayman Superintendent's Office 422 West 1 st Street DeWitt, AR 72042	B. Received by (Printed Name) <i>Shirley Dillion</i>
	C. Date of Delivery 8-10-10
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label)	7008 1140 0000 2999 9205
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540

Attachment 3 c

Gillett Civic Group, Inc.

Po Box 116
Gillett, AR 72055

August 9, 2010

To: Dumas School District
Superintendent's Office
Attn: Mr. Tom H. Cox
213 Adams Street
Dumas, AR 71639

Dear Mr. Cox,

In accordance with the requirements for the 2010 open enrollment charter school application we are notifying you of the public hearing to be held Thursday, August 12, 2010 at the St. Paul Lutheran Church Fellowship Hall in Gillett at 7:00 pm.

If you have any questions, please call me at 888-764-3130.

Sincerely,

Derek Menard

Derek Menard,
President

www.gillettcivicgroup

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com		
OFFICIAL USE		
Postage	\$ 0.44	0342
Certified Fee	\$2.00	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 5.54	
Sent To: Dumas School Dist. - Dr. Tom Cox		Postmark Here
Street, Apt. No., or PO Box No. 213 Adams Street		
City, State, ZIP+4 Dumas, AR 71639		
PS Form 3800, August 2006		See Reverse for Instructions

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>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) TUCKER TAYLOR</p> <p>C. Date of Delivery 8-10-10</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Dumas School District Superintendent's Office Attn: Dr. Tom H. Cox 213 Adams Street Dumas, AR 71639</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7008 1140 0000 2999 9212</p>
PS Form 3811, February 2004	Domestic Return Receipt
	102595-02-M-1540

Attachment 3 c

Gillett Civic Group, Inc.

Po Box 116
Gillett, AR 72055

August 9, 2010

To: Stuttgart School District
Superintendent's Office
Attn: Mrs. Lynn Derdenne
2501 South Main
Stuttgart, AR 72160

Dear Mrs. Derdenne,

In accordance with the requirements for the 2010 open enrollment charter school application we are notifying you of the public hearing to be held Thursday, August 12, 2010 at the St. Paul Lutheran Church Fellowship Hall in Gillett at 7:00 pm.

If you have any questions, please call me at 888-764-3130.

Sincerely,

Derek Menard

Derek Menard,
President

www.gillettecivicgroup.org

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com		
STUTTGART AR 72160		
Postage	\$ 0.44	0342 Postmark Here AR 72042 9 2010 08/09/2010 USPS
Certified Fee	\$2.80	
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 5.54	
Sent To: Stuttgart School Dist - Mrs Lynn Derdenne Street, Apt. No., or PO Box No. 2501 South Main City, State, ZIP+4 Stuttgart, AR 72160		
PS Form 3800, August 2006		See Reverse for Instructions

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. 	A. Signature <i>Micki Hackman</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: Stuttgart School District Superintendent's Office Attn: Mrs. Lynn Derdenne 2501 South Main Stuttgart, AR 72160	B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
	7008 1140 0000 2999 9229
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	