

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

MC LAUGHLIN LIVING TRUST  
1171 W MEADOWHURST RD  
ST MARIES, ID 83861

RECEIVED

MAY 24 2012

DEPARTMENT OF  
WATER RESOURCES**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Emma M. Laughlin* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

*Emma M. Laughlin* C. Date of Delivery *5-21-12*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 3020 0001 4040 3324

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540