

**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:**

WILKERSON, ALBERT  
24993 N CEDAR MOUNTAIN RD  
ATHOL, ID 83801

**COMPLETE THIS SECTION ON DELIVERY****A. Signature**

*Albert Wilkerson* ☐ Agent  
☒ Addressee

**B. Received by (Printed Name)****C. Date of Delivery**

AMY C WILKERSON 3-20

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

**RECEIVED**

**MAR 22 2013**

DEPARTMENT OF

**3. Service ~~1st~~ WATER RESOURCES**

- ☐ 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) ///

7012 1640 0001 3856 4170

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540