

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:

HANSEN, RICHARD
PO BOX 8
BAYVIEW, ID 83803

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
X *[Signature]* ☐ Addressee
- B. Received by (Printed Name) *RICHARD HANSEN* C. Date of Delivery *3-21-13*
- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

DEPARTMENT OF
WATER RESOURCES

- 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)

7012 1640 0001 3856 6075

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540