

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:

KNOLL, THOMAS E
15161 N JACK PINE TRL
HAYDEN, ID 83835

2. Article Number

/// (Transfer from service label) ///

7012 1640 0001 3856 6488

PS Form 3811, February 2004

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

Tom Knoll

☐ Agent☐ Addressee**B. Received by (Printed Name)**

Tom Knoll

C. Date of Delivery**D. Is delivery address different from item 1?**☐ Yes

If YES, enter delivery address below:

☐ No

MAR 25 2013

**DEPARTMENT OF
WATER RESOURCES**

3. Service Type☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.**4. Restricted Delivery? (Extra Fee)**☐ Yes

RECEIVED