

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:

TREFZ, GARY
18491 S FRANCIS FAIRE RD
WORLEY, ID 83876

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

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

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

3-21-13

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

7012 1640 0001 3856 3968

Domestic Return Receipt

102595-02-M-1540