

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:

FERNAN VILLAGE
103 THERESA DR
COEUR D'ALENE ID 83814

2. Article Number
(Transfer from service label)

7012 1640 0001 3856 0035

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐
- Agent
-
- ☐
- Addressee

B. Received by (Printed Name)

RICHARD SURVEIN

C. Date of Delivery

29 MAR 13

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

APR 02 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

Domestic Return Receipt

102595-02-M-1540