

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:

HECLA LTD
6500 N MINERAL DR STE 200
COEUR D ALENE, ID 83815

COMPLETE THIS SECTION ON DELIVERY

A. Signature:

X *D. Nolan*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

D. Nolan

C. Date of Delivery

D. Is delivery address different from item 1?
If YES, enter delivery address below:

- ☐ Yes
☐ No

MAY 24 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

2. Article Number

(Transfer from service label)

7012 1640 0001 3856 0448

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540