

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:

MICHAEL J & ANNE E PERDUE
17119 NORLENE WAY
GRASS VALLEY, CA 95949

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Michaela Perdue* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Michaela Perdue

C. Date of Delivery

5/24/13

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below: ☐ No

MAY 29 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 0769**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540