

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

NORTH LATAH COUNTY HWY DIST
1132 WHITE AVE
MOSCOW ID 83843



9590 9403 0913 5223 3889 68

2. Article Number (Transfer from service label)

7016 1370 0000 2016 7328

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *D Carson/Hen*

☒ Agent
☐ Addressee

B. Received by (Printed Name)

HS CIO CIA

C. Date of Delivery

6/1/20

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

il Restricted Delivery