

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.

1. Article Addressed to:

ROBERT J JAEGER
1333 S NORTHERN LIGHTS BLVD
COEUR D ALENE ID 83814



9590 9402 2140 6132 5075 15

2. Article Number (Transfer from service label)

7016 0750 0000 2175 5109

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

COVID 19

3. Service Type

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

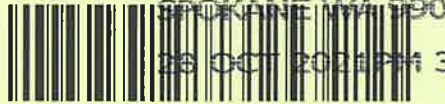
☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



9590 9402 2140 6132 5075 15

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP code in this box.

**Dept. of Water Resources
Adjudication Section
P.O. Box 83720
Boise, ID 83720-0098**

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

RECEIVED
NOV 01 2021
DEPARTMENT OF
WATER RESOURCES