

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:

MACPHEE LIVING TRUST
3975 S BOOTHE PARK RD
COEUR D ALENE ID 86814



9590 9402 2140 6132 5079 73

2. Article Number (Transfer from sender label)

7016 0750 0000 2175 5116

COMPLETE THIS SECTION ON DELIVERY

A. Signature

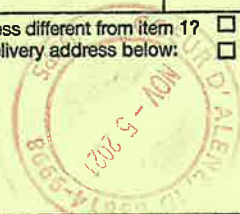
X

☐ 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



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

(over 300g)

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

Domestic Return Receipt

USPS TRACKING#

SPOKANE WA 990



5 NOV 2021 PM 4 L



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

9590 9402 2140 6132 5079 73

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box.

Dept. of Water Resources
Adjudication Section
P.O. Box 83720

RECEIVED
NOV 09 2021
DEPARTMENT OF
WATER RESOURCES