

USPS TRACKING #



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

9590 9402 1621 6053 7954 69

United States
Postal Service

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

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WESTERN REGIONAL OFFICE
2735 AIRPORT WAY
BOISE, IDAHO 83705

RECEIVED

JUL 13 2020

WATER RESOURCES
WESTERN REGION

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:

Mary Walsh
1650 W Targe St #5008
Boise ID 83705



9590 9402 1621 6053 7954 69

2. Article Number (Transfer from service label)

7016 1370 0000 2332 8030

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Mary Walsh

C. Date of Delivery

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



3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☒ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Registered Mail | |

Domestic Return Receipt

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, and fee as appropriate)

- | | |
|--|----------|
| ☐ Return Receipt (hardcopy) | \$ _____ |
| ☐ Return Receipt (electronic) | \$ _____ |
| ☐ Certified Mail Restricted Delivery | \$ _____ |
| ☐ Adult Signature Required | \$ _____ |
| ☐ Adult Signature Restricted Delivery | \$ _____ |

Postage

Total Postage and Fees

Sent To

Mary Walsh
1650 W Targe St #5008
Boise ID 83705

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Order Consolidating
Matters for Hearing,
etc.

Postmark

Here:
Postmark: 6/3-3/2025

TR: 83875

Sent 6/19/2020

7016 1370 0000 2332 8030