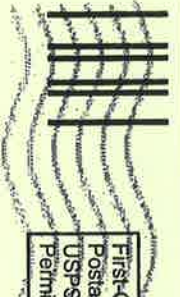


USPS TRACKING #



9590 9402 1621 6053 7952 23



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

United States
Postal Service

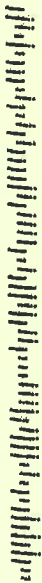
RECEIVED

SEP 25 2020

WATER RESOURCES
WESTERN REGION

• 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



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:

Black Canyon Inn Dist
46 Andrew Waldera
Sawtooth Law Office
1109 River St Ste 110
Boise ID 83707



9590 9402 1621 6053 7952 23

2. Article Number (Transfer from service label)

7016 1370 0000 2332 8122

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

☐ Agent

B. Received by (Printed Name)

Blom

C. Date of Delivery

9/23/20

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

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 |
| ☐ Mail | |
| ☐ Mail Restricted Delivery | |

Domestic Return Receipt

See Reverse for Instructions

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

Sent To Black Canyon Inn Dist
Street and Apt. No., or PO Box No.
City, State, Zip+4
Lakeside, CA 92040

Postmark
Here
0202/816
1832-59

Notice of Hearing
& Scheduling Order

Extra Services & Fees (check box, add 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	\$
Certified Mail Fee	\$

OFFICIAL USE

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

Domestic Mail Only

CERTIFIED MAIL® RECEIPT

U.S. Postal Service™

7016 1370 0000 2332 8122