

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

ORCHARD VIEW ENTERPRISES LLC
2206 MAYBERRY LN
FILER ID 83328

2. Article Number
(Transfer from s

7016 0750 0000 5029 0060

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/9/15

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below

☒ No

MAY 08 2019

DEPARTMENT OF
WATER RESOURCES

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt